



**Controller's Office
Petty Cash Reconciliation Form**

PETTY CASH FUND DETAIL				
DEPARTMENT NAME		CUSTODIAN NAME		CUSTODIAN USC ID
RECONCILIATION DATE		APPROVED PETTY CASH FUND AMOUNT		CASH PHYSICAL LOCATION
OPERATING UNIT	DEPT	FUND	CLASS	

PETTY CASH STATUS: CLOSE MAINTAIN

CURRENCY ON HAND		
CURRENCY	QUANTITY	TOTAL
PENNIES		
NICKELS		
DIMES		
QUARTERS		
ONES		
FIVES		
TENS		
TWENTIES		
FIFTIES		
HUNDREDS		

TOTAL

Receipts on hand (amount to be reimbursed)

Total Reconciled Petty Cash

Total Approved Petty Cash Fund Per Above

Variance*

*For any variance, please contact the Controller's Office for resolution at TREASURY@mailbox.sc.edu.

By signing below, we certify the petty cash funds were counted by the custodian as witnessed by the department head. Additionally, we certify the funds are kept in a secure location.

CUSTODIAN SIGNATURE: _____ **DATE:** _____

DEPARTMENT HEAD NAME: _____ **DATE:** _____

DEPARTMENT HEAD SIGNATURE: _____ **DATE:** _____

Controller's Office Use Only:

Reviewed by: _____
 Review Date: _____
 Follow-up or
 action needed: _____