

DEPARTMENT OF NATURAL RESOURCES
PETTY CASH MONTHLY RECONCILIATION

Agency (check one): 431 432 434 435

Month: _____ Year: _____

Custodian Name: _____

Location: _____

Petty Cash Amount (at full replenishment): _____

Less Cash On-Hand: (_____)

Less Receipts On-Hand: (_____)

Difference: _____

If "difference" is greater or less than zero, explain:

By my signature below, I certify the information I provided on this form is true and correct to the best of my knowledge.

Custodian Signature: _____

Approver Signature: _____