

**UNIVERSITY FOR DEVELOPMENT STUDIES  
PETTY CASH CLAIM FORM**

Name of Claimant:.....

Faculty:.....Department.....

Amount to be Refunded GHS:.....

Amounts in Words:.....

.....

DATE	DESCRIPTION OF TRANSACTION	AMOUNT (GHS)

SIGNATURE OF CLAIMANT:..... DATE:.....

APPROVED BY HOD:..... DATE:.....

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