

STATEMENT OF CASH VERIFICATION FUNDS ADVANCED TO IMPREST FUND CASHIER			
NAME OF: <input type="checkbox"/> CASHIER <input type="checkbox"/> SUBCASHIER		TITLE	LOCATION (City and State)
FUNDS ADVANCED	FROM (Name)	TITLE <input type="checkbox"/> CLASS-B CASHIER <input type="checkbox"/> DISBURSING OFFICER	D.O. SYMBOL
	AMOUNT		\$
Cash on Hand		\$	These two amounts should be same ↑ otherwise, explain below ↓
Interim Receipts for Cash Advanced to Unbonded Employees			
Receipts on Hand for Cash Advanced to Subcashiers			
Uncashed Advance Checks			
Unvouchered Receipts and Other Subvouchers			
Unpaid Reimbursement Vouchers. (List date(s))			

Funds Returned to Reduce Amounts Advanced			
TOTAL ACCOUNTED FOR			\$
Difference, if any, between FUNDS ADVANCED and TOTAL ACCOUNTED FOR (Explain below)			\$
Explanation, (Continue on reverse)			
CERTIFICATE - We, the undersigned, verified the imprest fund of the above named cashier and hereby certify that the amount reported as "Total Accounted For" is current as of the time and date shown.		Time	Date
Date	Signature	Title	