

**STATE OF NORTH CAROLINA**  
 Judicial Branch Of Government  
 Administrative Office Of The Courts

**REIMBURSEMENT OF  
 AUTHORIZED  
 PETTY/EMERGENCY PURCHASES**

**DO NOT USE THIS FORM FOR BOOKS, EQUIPMENT, PRINTING OR SUPPLIES AS THESE REQUIRE PRIOR APPROVAL FROM PURCHASING SERVICES, USING FORM AOC-A-201.**

Submit the completed form and receipts to [AccountsPayable@nccourts.org](mailto:AccountsPayable@nccourts.org).

I, the undersigned, request reimbursement for the payment of petty/emergency purchases as described below:

Date	Paid To	Paid Invoice/Description	Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
<b>TOTAL REIMBURSEMENT</b>			\$

<i>Requester Name</i>	<i>Job Title</i>	<i>County/District</i>
<i>Work Address</i>	<i>Email Address</i>	<i>Work Telephone</i>
<i>Mailing Address</i>		
<i>Requester Signature</i>	<i>HR-Payroll System (BEACON) Number, if known</i>	<i>Date</i>
<i>Supervisor Signature</i>	<i>Supervisor Name</i>	<i>Date</i>

FOR USE BY AOC FISCAL SERVICES DIVISION			
COMPANY	ACCOUNT	CENTER	AMOUNT
020__	533110		
020__	532850003		
020__	535900		
020__			

**Approval For Payment/Date**

**Vendor No.**