

Request for Petty Cash Fund

	☐ Request	for Permanent Petty Cash Fund (000001-11N)
	□ Request	for <u>Additional</u> Petty Cash Funds (000001-11N)
	□ Request	for Custodian Change (only check if there is a custodian change)
Request for Additional Request for Custodian Request Date: Department: Contact: Petty Cash Amount Requested: \$ Justification of Need for Fund: Requested by: Custodian and Supervisor: Custodian Name (please print):	Phone:	
Department:		PO#
Contact:		Date Needed:
Petty Cash Amount Requested: \$ Additional Cash Requested \$ _		
		How many cash boxes needed?
Justification	of Need for Fun	d:
Requested by	y: Custodian an	d Supervisor:
Custodian Na	ame (please print):	
Custodian Sig	gnature:	
Supervisor/D	ept. Head Name (please print):
Supervisor/D	ept. Head Signatu	ıre:
Submit comp	leted form to:	Senior Operations Accountant Morrow Hall Room M-106 (541) 278-5746
For Business	Office use only:	
Business Off	ice Approval	Date
Petty Cash F	unds Returned \$	