Section 1: Depar	tment Inforn	nation				
Request Date:	Departme	ent:		ORG Code:_		
Custodian Name:		Phone:		E-Mail:		
Section 2: Reque	est Details					
·	•	t – for providing change f n – submitted with Petty				
Current Petty Cash on Hand for Department Org Code		Amount of this Request (if returning funds, show as negative)		Total Pet	Total Petty Cash Fund	
\$		\$	,	\$		
Section 3: Custodi	an/Requestor					
Custodian Printed Name	Sig	nature			Date	
Section 4: Approv	al					
DRG Signature Authority Printed Name		Signature			Date	
Iniversity Cashier / Designee Printed Name		Signature			Date	
Cash Fund Possess						
*New funds, sign in the presence	of Cashier's Staff at the	time of funding. For Annual Certi	fication, signature repr	esents acknowledgem	ent of possession.	
Received by Printed Name	**	Signature			Rice ID Number	
<u> </u>						
Amount	Date					
Cash Fund Return	Information					
5						
Amount Received	Date Recei	ved by Cashier	Cashier Office Sign	gnature		