



TO: Joyce Murrell  
General Accounting  
349 BioEnterprise – 7006

FROM: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

DATE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

RE: Petty Cash Request / Authorization

- Request a New Petty Cash Fund
- Change the Petty Cash Amount Fund #: \_\_\_\_\_
- Close the Petty Cash Fund Fund #: \_\_\_\_\_

Department Name: \_\_\_\_\_

Dept ID: \_\_\_\_\_

Custodian Name: \_\_\_\_\_

Custodian Empl ID: \_\_\_\_\_

Custodian Phone #: \_\_\_\_\_

Custodian E-Mail: \_\_\_\_\_

Amount of Fund: \_\_\_\_\_

Purpose of Fund: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Approval – Management Center Finance Office

For questions regarding this form, please contact the General Accounting Office at 368.5935 or [genacct@case.edu](mailto:genacct@case.edu).

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For Accounting Use Only

SpeedType: \_\_\_\_\_ Date \_\_\_\_\_

Approved By: \_\_\_\_\_