



DATE: _____

TO: Banking Services
555 South Howes Street
6015 Campus Delivery
Phone: (970) 491-0597

FROM: _____

SUBJECT: Request for a decrease/close an existing: Petty Cash Fund
Change Fund

(Department name) _____, Dept. # _____, requests a decrease/close in an existing petty cash or change fund in the amount of \$_____. The new total, if approved, will be \$_____. Petty Cash/Change Fund procedures are outlined in the Business and Financial Services FPI 6-2.

Justification is as follows:

(Signature) Department Head/Date

(Signature) Fund Custodian/Date