Project Adv	Date Closin	Date Closing Advance/Imprest Fund:						
Imprest Fund Deliver in Po	Danthan Ca	Panther Card ID Number of Custodian:						
Denver in 1	Pantiler Ca.	Pantner Card ID Number of Custodian:						
	101 Sparks (404) 413-3			601708				
		Closing	Project Adva	nce/Imprest Fund				
Department Na	me:			Date of Advance/Imp	rest:			
Name of Custo				•				
Contact Email:				Contact Telephone:				
Signature of Cu	stodian							
lease attach	all supporting doc	cumentation. (	Only origina	l, witnessed receipts	will be ac	ccepted.		
			Distribu	ıtion				
SpeedType	Amount	Account (6)	Fund (5)	Dept (9)	Program (5)	SubClass (5)	Project/Grant (10)	
r	Γotal							
	10441							
Composition						Amount		
Currency (USD								
Coins (USI	O)							
GL 1 GL T	1.01.1.0	2.1		Cash Su	ıbtotal			
Checks (List Ea	ach Check Separately I	Below or Attach Cl	neck Log)		Total			
					Total			
		List	of Checks (i	f applicable)				
				ter's Name	A	Amount		
Total Amount of Checks Listed								
				nts subject to punishment by a fin				
				the described item(s) is/are for in and that payment has not been re				
By signing the vo	ucher, the individual is certi- ing charged, and the charge	fying that he/she is auth	norized on the Char	rtField combination(s), that the charity and Project guidelines and the	narges are app	ropriate to the C	hartField	
*Signature of Authorized Requestor/Initiator: (required)					Date (required):			
*Signature of A	uthorized Approver for Gran	nt/Project:		Date (re	quired):			
cquirea ana aijj	c.c jrom mittuor tioove)							
Cashier's Use C	)nlv·	Pavfil	e Number:	Transaction	n Number			

<sup>\*</sup>Original, dated signatures are required for closure to be processed.