



CLOSING FORM

Petty Cash Change Fund

Petty Cash General Fund

Deliver in Person To: University Cashier
 100 Sparks Hall
 (404)413-3251 phone

Date Closing Petty Cash Fund:
Panther Card ID Number of Custodian: 601708 _____ X

Closing Petty Cash Change Fund or General Fund

Department Name:	Date of Advance:
Name of Custodian:	
Contact E-mail:	Contact Telephone:
Signature of Custodian:	

Distribution

Speed type	Amount	Account (6)	Fund (5)	Dept (9)	Program (5)	SubClass (5)	Project/Grant (10)
Total							

Composition

Composition	Amount
Currency (USD)	
Coins (USD)	
Cash Subtotal	
Checks (List Each Check Separately Below or Attach Check Log)	
Total	

List of Checks (if applicable)

Check Date	Check Number	Remitter's Name	Amount
Total Amount of Checks Listed			

Printed name of Authorized Requestor/Initiator:
Signature of Authorized Requestor/Initiator: <i>(required)</i>
Printed name of Authorized Approver:
Signature of Authorized Approver: <i>(required and different from Initiator above)</i>

Cashier's Use Only:	Payfile Number:	Transaction Number:
---------------------	-----------------	---------------------