



Division of Finance & Administration
Controller's Office

PETTY CASH REQUISITION

Date: _____
Department Name: _____
Ignite Department #: _____
Business Officer: _____

Fund Custodian: _____
Custodian BU ID #: _____
Custodian Email: _____
Phone #: _____

PROPOSED USE OF FUNDS	AMOUNT

Entity	Department	Fund	Designation	Account	Purpose	Activity
				11255	000	

**Date Funds are needed: _____ Date Funds will be returned: _____

Requested denominations: \$1 _____ \$5 _____ \$10 _____ \$20 _____ Other: _____

APPROVALS

Custodian

Business Officer

Forward completed form to Financial_Services@Baylor.edu after approvals.

Controller's Office

Student Financial Services

FUNDS RECEIVED BY

Printed name

BU ID#

Signature

Date

*The Custodian is responsible for the funds. Any lost or misappropriated funds will be recovered by Baylor payroll deduction.