

**UNIVERSITY
OF TORONTO**

**PETTY CASH FUND
OR IMPREST EXPENDITURES BANK ACCOUNT:
REQUEST FOR NEW FUND OR FUND INCREASES**

No. _____

DATE: _____

PAYABLE TO:

PERSONNEL NO.

DOCUMENT NO.

CURRENCY
 CAD
 US

ADDRESS OF PAYEE:

NEW FUND AMOUNT REQUIRED
 FUND INCREASE BY: \$ _____

ACCOUNTING INFORMATION

BUSINESS AREA
IF OTHER THAN 1000

VENDOR (CUSTODIAN) ACCOUNT
(LEAVE BLANK IF REQUESTING NEW FUND)

SPECIAL INSTRUCTIONS

- CAMPUS MAIL
- PICK-UP AT 2ND FLOOR, 215 HURON STREET

COMPANY CODE
IF OTHER THAN UOFT

DEPARTMENT CONTACT NAME:

SIGNATURE

DEPARTMENT / OFFICE

TELEPHONE NUMBER

FAX NUMBER

AUTHORIZED APPROVAL

SIGNATURE

PRINT NAME

TITLE