

## Request to close a petty cash fund or change fund

Memo to:	Controller
From:	
Date:	
Subject:	Request to close/adjust petty cash or change fund
fund f  The to below adjust  I will h the Bu	est approval by the parties listed below to close/adjust the petty cash or change for my department or University organization.  Intal cash amount or adjustment amount will be deposited into the FOAP listed of UNC's Internal Auditor has reviewed this request and approved the closure or ment.  In and-deliver the cash, a Deposit Transmittal form and this form to the Head Cashier in cursar's Office, located in Carter Hall.  Is steps will signify relinquishment of custody of the funds.
Amount being deposited: \$	
Receiving FOAP	
Head Cashier siខ្	gnature
Cash Accountar	t signature
UNC Controller	signature