**Student Engagement & Campus Life**  
**Cash Box (Petty Cash) Request Form**

(**Form must be completed and turned in at least 72 Business Hours in advance of date needed**)  

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**Organization, Committee, or Department**

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**Person(s) Authorized to Pick Up Cash Box**

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**Event and/or Purpose of the Cash Box**

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**REQUESTED CASH BOX (PETTY CASH) DATE / TIME INFORMATION**

Requested Date to be PICKED UP: _____ / _____ / _____  
TIME: _____ : _____ am pm

Requested Date to be RETURNED: _____ / _____ / _____  
TIME: _____ : _____ am pm

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**AMOUNT REQUESTED FOR PETTY CASH BOX:**

**Total Dollar Amount**

- 10's $ __________________
- 5's $ __________________
- 1's $ __________________
- Quarters ($10.00) $ ______________
- Dimes ($5.00) $ ______________
- Nickels ($2.00) $ ______________

**BOX TOTAL** $ ______________

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**Requesting Party's Signature:** ________________________________

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**Hokie Passport:** # ________________  
**email:** ___________________________ @ ________________

**Cell Phone #:** (_____ ) _____ - _____  
**Other Phone #:** (_____ ) ____ - ________

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**FOR CASH OFFICE USE ONLY**

**Approved By:** __________________________  
**Date:** _____ / _____ / _____

**Cash Office Accounting Associate**  

**BOX NUMBER:** ______________  
**NOTES:** ______________