



LOUISIANA STATE UNIVERSITY

Louisiana State University  
Office of Accounting Services  
Financial Accounting and Reporting  
204 Thomas Boyd Hall

**PETTY CASH CHECK REQUEST**

**AS750**

This form should be used to request petty cash advances for change funds.

Request Date \_\_\_\_\_

Department		
Contact		
Phone	Fax	E-mail

Supplier ID #	SPL-23055	Payee	Beth Nettles, Fund Custodian				
Document #		Address	Bursar Operations, 125 Thomas Boyd Hall				
Document Date		City	Baton Rouge	State	LA	Zip	70803

Spend Category	Petty Cash (SC8000)
Fund	
Amount	

Purpose of Payment \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Notify department when check is ready.

Routing and Approval Signatures – LSU		
Petty Cash Custodian, Department	Printed Name	Date
Department Head	Printed Name	Date
Petty Cash Administrator, FAR	Printed Name	Date

**Routing Petty Cash Check Request:** Dept → Financial Accounting & Reporting → Accounts Payable & Travel