

Authorization to Collect Funds

Please submit this form to the Business Office at least one week in advance.

Department:

Signature of Budget Holder:

Description of Event on Sale:

Date of Event or Sale:

**Please describe the following Collection Controls:**

Who will be responsible for collection of cash?

Who will be responsible for depositing the funds with Student Accounts?

Which Will cash be recorded on receipts and a copy given to each customer? Yes / No

Will a log of all cash collections be kept by your department? Yes/No