

**FORM A-37
STATE OF WASHINGTON
APPLICATION AND AUTHORIZATION FOR PETTY CASH ADVANCE
TREASURY FUNDS**

AGENCY _____
(NAME) (NUMBER)

FUND/ACCOUNT TO BE CHARGED _____
(TITLE) (ACCOUNT)

Current Petty Cash Balance (GL Code 1130) (Treasury Funds) \$ _____

Requested Petty Cash Increase (SAAM 85.50.60.a) \$ _____

Revised Petty Cash Balance \$ _____

JUSTIFICATION OF PETTY CASH INCREASE
(Attach additional statements as needed)

REQUESTED BY: _____
Agency, Chief Financial Officer Date

APPROVED BY _____
OFM, State Financial Consultant
Statewide Accounting Date