



UNIVERSITY OF WASHINGTON  
**APPLICATION FOR REVOLVING FUND INCREASE**  
FINANCIAL SERVICES, BANKING & ACCOUNTING OPERATIONS  
BOX 351120

**HINT:** For most efficient use of this form use the tab key to access the first field, then continue to tab through the form fields.

Revolving Fund (Name of fund)		
Vendor Number —	Department	Box Number
Type of Fund <input type="checkbox"/> Cash <input type="checkbox"/> Checking		
	Current Revolving Fund Balance	
	Requested Revolving Fund Increase	
	Revised Revolving Fund Balance	
Justification of Revolving Fund Increase		
<input type="checkbox"/> Mail	Contact Person	
<input type="checkbox"/> Call for Pick-up	Contact Person's Phone	
<b>REQUESTED BY</b>		
Revolving Fund Custodian _____ Date _____		
<b>APPROVED BY</b>		
Financial Services _____ Date _____		