

Cash Float Request Form



If you require a float, you must hand in this form **1 day BEFORE** the date of your request. Cash float forms handed in on the day of request will not be accepted.

Please select:

SCSU Chapter

SCSU Club

Details of Chapter/Club requesting float

Please fill out the details below.

Chapter/Club Name:	Person Completing Form :
Phone or email:	Position in Chapter/Club:
Date of Float Request:	Time Float Required:
Reason Float is Required: <i>(i.e. function, ticket sales)</i>	

Breakdown Requirements

Notes	QTY	Coins	QTY
\$100		\$2	
\$50		\$1	
\$20		25¢	
\$10		10¢	
\$5		5¢	
		TOTAL:	\$

Cash Floats can be collected from **the SCSU Office F1200** on the day of use and **must** be returned 1 hour before closing business (**4:30pm**).

By signing this form, you are responsible for the float and its return in full.

TOTAL Float: \$ _____

Chapter/Club Representative: _____

Signature: _____

Staff Only

Cash Float Distributed

Notes	QTY	Coins	QTY
\$100		\$2	
\$50		\$1	
\$20		25¢	
\$10		10¢	
\$5		5¢	
Date: _____			
Sign: _____		TOTAL:	\$

Cash Float Returned

Notes	QTY	Coins	QTY
\$100		\$2	
\$50		\$1	
\$20		25¢	
\$10		10¢	
\$5		5¢	
Date: _____			
Sign: _____		TOTAL:	\$