

May 9, 2011

North Carolina Department of Administration REQUEST FOR CASH RECEIPTING PRIVILEGE

- Permanent Privileges: Attach Cash Receipting Requirements form.

 Revision: Complete this form in its entirety.

 Temporary Privileges: Attach Cash Receipting Requirements form.

TO: Chief Fiscal Officer

FROM:

DATE:

The following is a request for authorization for cash receipting privileges:

Division/Commission:

Employee Authorized to Receive Cash	Job Title	Telephone Number	Email Address
Primary: <input style="width: 80%; height: 15px;" type="text"/>			
Alternate(s): <input style="width: 80%; height: 15px;" type="text"/>			

Note: The primary contact person denotes the person responsible for overseeing the receipting activity and maintaining a receipting process consistent with Administration policy.

Purpose for Receipt of Cash:	NCAS-6-Digit Account(s) to Receive Funds

Your signature indicates that you are requesting cash receipting privileges based on the above information.

Division/Commission Head

Phone

Date

Distribution: Send original and one photocopy to the Fiscal Budget Officer. Attach Cash Receipting Requirements form as specified above.

Authorized:

Chief Fiscal Officer

Date

Mandatory training has been completed for all employees authorized to receive cash.

Fiscal Accounts Receivable

Date