



REQUEST TO ESTABLISH OR INCREASE A PETTY CASH OR CASH CHANGE FUND

Form 3102.10-A

Type of Request: Petty Cash or Change Fund New or Increase

Department Name: _____

Name of Petty Cash or Cash Change Fund: _____

Location of Fund (Building & Room #): _____

Describe Security Arrangements for Fund (locked cash box, locked desk, safe, etc.):

BU/Account/Fund to be charged: _____

Amount of Petty Cash or Change Fund Request: _____

Purpose and Use of Fund
(or Reason for Increase):

I request that Financial Services establish (or increase) a cash fund in the name of _____ (name).

Appropriate Administrator (Print name) (Signature) Date

Certification of Custodian:

I agree to accept custodianship and personal responsibility for the fund.

Custodian Name (Print name) (Signature) Date

APPROVED:

AVP Financial Services (Print name) (Signature) Date

| | | |
|----------------------------------|-------------------------------|---|
| Office Use Only: | Check Disbursement Date _____ | Amount _____ |
| Check # _____ | A/P Voucher # _____ | Custodian Training Provided (date): _____ |
| Completed and Reviewed by: _____ | Date: _____ | |
| University Cashier | | |