

Office of Financial Services Temporary or Permanent Change Fund Request

It is the responsibility of the Cash Custodian to maintain the cash in a secure location with limited access and maintain control over the cash on hand at all times. The cash drawer must be balanced daily. In the event of missing funds or inappropriate use of funds, the Cash Custodian should contact the Cashier's Office and Public Safety immediately for an investigation. The Cash Custodian will not, under any circumstances, cash a check(s) out of the change fund or funds that are being collected.

By signing this form, the cash custodian acknowledges that (s)he has read and agrees to abide by the Cash Collection Procedures.

Department Head Signatures required on Temporary Funds over \$50.00 and all Permanent Funds.

Amount \$	Permanent Fund	Temporary Fund
Date:	Department:	
Authorized Depa	rtment Head: Name:	
Signature:	(Print or Type) gnature: Date:	
Change Fund Cu	ıstodian: Name:	
Signature:		(Print or Type) Ite:
Authorized Finar	nce & Accounting: Name:	
		(Print or Type)
Signature:	Da ⁻	te: