

**PETTY CASH AND CHANGE FUND  
AUTHORIZATION FORM**

Department Name: \_\_\_\_\_

Location: \_\_\_\_\_

**1. Fund type requested:**

Change Fund

Petty Cash Fund

**For petty cash fund:**

■ Have you read the Purchasing with Petty Cash Funds Policy? **YES** \_\_\_ **NO** \_\_\_

■ Describe the expected types of purchases: \_\_\_\_\_

■ Anticipated monthly dollar level of petty cash purchases? \_\_\_\_\_

**2. Fund No. or FAST Index:** \_\_\_\_\_ **Financial Manager:** \_\_\_\_\_

**3. Fund amount requested:** \_\_\_\_\_

**4. Describe the physical storage device to be used to secure the fund (vault, locked metal box within a locking cabinet, etc.):**

\_\_\_\_\_

**5. Name and position of custodian of the fund:** \_\_\_\_\_

**I certify that I have read and will comply with the following policies and any related procedures: Purchasing with University Funds; Authorizing and Maintaining Petty Cash and Change Funds.**

\_\_\_\_\_  
**Financial Manager Signature**

\_\_\_\_\_  
**Phone**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Custodian Signature**

\_\_\_\_\_  
**Phone**

\_\_\_\_\_  
**Date**

*Bursar Use Only*

**Comments:**

\_\_\_\_\_

**APPROVED:**

**NOT APPROVED:**

**Reason:** \_\_\_\_\_



**Bursar (designee)**

**Date**