

# Form 2815 FR.03

# **Instructions for Petty Cash Fund Request Form**

Revised 5/16/2017

# **PURPOSE OF THE FORM**

- Departments requiring the establishment or an increase to a petty cash fund must submit a Petty Cash Fund Request form.
- 2. The form must also be used whenever a new custodian is named to an existing petty cash fund.
- 3. The completed form must be authorized by the Department Administrator or Lead Administrator and submitted to Department of Treasury Services:
  - Central: 2 Whitney Ave, 1st floor, P.O. Box 208231
  - Med School: 333 Cedar Street, SHMIIOO

#### **CUSTODIAN INFORMATION**

- 1. Enter the following information in the spaces provided:
  - Department which is requesting the Petty Cash Fund.
  - Name, telephone number, and email address of the new custodian.

#### PURPOSE OF THE REQUEST

- 1. In the Date field, enter the date the form was completed in the format DD MON YYYY (e.g. 16 JAN 2017).
- 2. Check the box at the top of the form to indicate whether the form is being used to request a new fund, increase an existing fund, or change the custodian of an existing fund.
- 3. If changing a custodian, enter the exiting custodian's ID/Vendor number.

#### **REASON FOR THE FUND**

Only cash boxes for the purpose of making change at retail outlets will be approved.

# **FUND DETAILS**

- 1. Enter the following information in the spaces provided:
  - The COA distribution code to indicate how to charge the fund.
  - The actual physical location where all monies will be kept: building name, address, and office room number.
  - Description of how and where the funds will be secured: locked, fireproof, etc.
  - Requested dollar amount of the fund.

# **SIGNATURES**

- 1. Enter the name, department, and phone number of the authorizer (Lead or Department Administrator) who is responsible for approving the request.
- 2. Both the authorizer and the custodian named in the header must sign and date the form.
- 3. If the form is being used to change the custodian of an existing fund, enter the name of the exiting custodian, and obtain a dated signature, if possible.

#### SUBMITTING THE FORM

- 1. Send the completed form to Treasury Services at:
  - 2 Whitney Avenue, 1st Floor, P.O. Box 208231
- 2. When the request is approved, Treasury Services will send a copy of the request to Accounts Payable.