

Before a Petty Cash Fund is established, this form must be completed. Please see the Petty Cash/Change Fund Procedures for guidance. If the request is accepted, a check for the approved amount will be made payable to the Petty Cash or Change Fund Custodian. Once established, the fund can be replenished using a Petty Cash Reimbursement Request form.

Custodian Name: _____ Department Name: _____

Total Dollar Amount Requested: _____ Type of Fund: Petty Cash Fund Change Fund
(see Petty Cash/Change Fund Procedures for dollar amount guidelines)

Purpose of Fund (if requesting Petty Cash Fund over \$200 provide reason a fund of lesser amount would require replenishment more than once a month): _____

Physical Location of Fund: Building: _____ Department: _____ Room: _____

Means of safekeeping (e.g. safe, vault, locked cash box): _____

Mail (Provide Address)

Custodian Pick-up (Must present ID before check will be released)

If Change in the Amount of Fund: Previous Amount: _____ New Amount: _____

I certify that this Petty Cash or Change Fund will be administered in accordance with the Policies and procedures of Cal Poly Humboldt and with the educational mission of the University. By signing below, I certify that I have read and will comply with the Petty Cash/Change Fund requirements.

Name of Custodian (Print): _____ Title of Custodian: _____

Signature of Custodian: _____ Date: _____

Address for Check if Applicable: _____

Phone Number: _____ HSU ID# _____

Approval:

Department Head Name: _____ Department Head Signature: _____

University Controller Signature: _____ Date: _____

A/P Use Only:

Check processed to custodian: _____ Date: _____

A/P Tech Signature

Date

Chartfield: Fund: _____ Department: _____

Copy to Cashiers