

## SEMI-ANNUAL PETTY CASH - CHANGE FUND CUSTODIAN ACKNOWLEDGEMENT FORM

I,	, hereby ackne	owledge that I am the Custodian of the
Petty Cash/Change Fund (circ	ele one) for	, (Department Name)
Activity #:	in the amount of \$	. These funds will be
maintained at Building	, Room	

Acknowledgement Statement

I understand that I am responsible for safeguarding and maintaining accountability for these funds and agree to keep personal funds separate from Petty Cash/Change Funds. I understand that I must submit Petty Cash or Change Fund reconciliation to my supervisor for his/her signature. The signed reconciliation must be retained for audit purposes.

I also acknowledge that funds will not be used to reimburse any grant related expenditures; cash advances will not be made from this fund, sales tax cannot be reimbursed; and that expenses normally supported by a travel voucher are not reimbursed from this fund. All legal restrictions which apply to other disbursements by the University, apply to this fund.

Upon reassignment or termination from the University, I agree to return these funds to the Student Financials Office, Modesto A. Maidique Campus, SASC 103 or Biscayne Bay Campus AC1-140.

CUSTODIAN NAME:	TELEPHONE:
SIGNATURE:	PANTHER ID:
E-MAIL:	DATE:

ADDITIONAL COMMENTS: \_\_\_\_\_

Form must be submitted by June 30<sup>th</sup> and December 31<sup>st</sup> of every fiscal year. Form must be uploaded to the OneDrive or emailed to <u>cashrequests@fiu.edu</u> Attention: Oriana Estevez.