

PETTY CASH FUND

\_\_\_\_ New Account  
\_\_\_\_ Increase Account  
\_\_\_\_ Transfer Fund

I request the establishment of a petty cash fund, or to increase the present fund in the amount of \$\_\_\_\_\_ for the following purpose:

\_\_\_\_\_  
\_\_\_\_\_

I agree to maintain this fund in accordance with the University of Miami Petty Cash Fund Policies and Procedures. I have received and read a copy of the current Petty Cash Fund Policies and Procedures.

I authorize the University of Miami to deduct from any monies due to me from the University (including my payroll check) the amount of my Petty Cash Fund without further notice in order to affect its return to the University, in the event of any of the following:

1. My failure to maintain the Petty Cash Fund in accordance with the University's policies and/or procedures as amended.
2. My failure to confirm the Petty Cash Fund in a timely manner.
3. Theft or other loss of the Petty Cash Fund.

As signature #2, I authorize the University to charge account number \_\_\_\_\_ and account title

\_\_\_\_\_ should the University be unable to recover this fund from signature #1. (This account number may not be a sponsored program account.)

\_\_\_\_\_ Date \_\_\_\_\_ Employee ID # \_\_\_\_\_

Signature #1: Fund Custodian – Person primarily responsible for the Fund (Reimbursement checks will be issued to the custodian.)

\_\_\_\_\_ Date: \_\_\_\_\_

Signature #2: If Custodian is not an authorized signer of an account, then this line should be signed by an account authorized signature – Person secondarily responsible for funds.

\_\_\_\_\_ Date: \_\_\_\_\_

Signature #3: An individual who reports to a vice-president or a higher approval is needed to authorize a Petty Cash Fund.

\_\_\_\_\_ Date: \_\_\_\_\_

Signature #4: Vice President approval\*

\*If fund is more than \$ 5,000.00, a Vice president or designee (Assistant President level or Above) must approve.

**INSTRUCTIONS:**

Signature # 1 is required.

Signature # 2 and/or #3 and/or #4 is required as indicated.

Complete check request form and forward it with this form to the Disbursements Office, 750 Gables One Tower, Coral Gables, Loc. 2979.