

UNIVERSITY SYSTEM OF NEW HAMPSHIRE

Cash Fund Request (USNH-F44)

This form is to support requests for a new Petty Cash fund or for changes to an existing one.
 For a new fund: Complete section 2 in it's entirety; for a change to location or purpose of an existing fund: provide responses to questions 4 through 7 in section 2.

Custodian Information	Custodian Name: _____ Title: _____ Department Name: _____ USNH ID: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Campus Address: _____ User Name: _____
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Fund Identity	Identifying Title of Fund: _____ Petty Cash/Change Fund #: _____
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Create New Fund	<input type="checkbox"/> Check for a new Fund <input type="checkbox"/> Check for a change in location or purpose
1	Type of fund requested <input type="checkbox"/> Petty Cash <input type="checkbox"/> Change <input type="checkbox"/> Imprest Checking
2	Term funds are required <input type="checkbox"/> Indefinitely <input type="checkbox"/> Until - Date ____/____/____ <small>(mm/dd/yyyy)</small>
3	Amount Required \$ _____
Change location or Purpose of existing	Responsible FOAPAL <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 020 <input type="text"/> <small>Fund Orgn Acct Prog Actv</small>
4	Planned use _____
5	Proposed location for storage (Building/Room #) _____
6	Provisions for safeguarding the funds (safe, cashbox, etc.) _____
7	Anticipated monthly dollar amount of expenses \$ _____

Increase/Decrease Amount	Current Fund Amount \$ _____ New Fund Amount \$ _____ Reason for Change: _____ Date of deposit (if decrease): ____/____/____ <small>(mm/dd/yyyy)</small>
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Change Custodian	Current Custodian: _____ Title: _____ New Custodian: _____ Title: _____ <table style="width: 100%; border: none;"> <tr> <td style="width: 30%; border: 1px solid gray; padding: 2px;">Final Reconciliation Prepared by current custodian</td> <td style="width: 20%; border: none;">Received ____/____/____ <small>(mm/dd/yyyy)</small></td> <td style="width: 30%; border: 1px solid gray; padding: 2px;">Final Reconciliation Prepared by new custodian</td> <td style="width: 20%; border: none;">Received ____/____/____ <small>(mm/dd/yyyy)</small></td> </tr> <tr> <td style="border: none;">Initials: _____</td> <td style="border: none;"></td> <td style="border: none;">Initials: _____</td> <td style="border: none;"></td> </tr> </table>	Final Reconciliation Prepared by current custodian	Received ____/____/____ <small>(mm/dd/yyyy)</small>	Final Reconciliation Prepared by new custodian	Received ____/____/____ <small>(mm/dd/yyyy)</small>	Initials: _____		Initials: _____	
Final Reconciliation Prepared by current custodian	Received ____/____/____ <small>(mm/dd/yyyy)</small>	Final Reconciliation Prepared by new custodian	Received ____/____/____ <small>(mm/dd/yyyy)</small>						
Initials: _____		Initials: _____							

Campus Approvals	Custodian: _____ Date: ____/____/____ <small>(mm/dd/yyyy)</small> Department Head: _____ Date: ____/____/____ <small>(mm/dd/yyyy)</small> Campus Chief Financial Officer: _____ Date: ____/____/____ <small>(mm/dd/yyyy)</small>
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USNH Controller's Office Only	USNH Controller: _____ Date: ____/____/____ <small>(mm/dd/yyyy)</small> USNH Vice Chancellor (if checking): _____ Date: ____/____/____ <small>(mm/dd/yyyy)</small> Banner Document #: _____ Transaction Date: ____/____/____ <small>(mm/dd/yyyy)</small> Banner FOAPAL charged: <input type="text"/> <input type="text"/> <input type="text"/> 020 <input type="text"/> <small>Fund Orgn Acct Prog Actv</small> Petty Cash/Change Fund #: <input type="text"/>
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Instructions for Completion of the USNH CASH FUJD REQUEST – Form USNH-F44

Requesting a NEW fund:

Complete the following:

CUSTODIAN INFORMATION
LOCATION
AMOUNT,
FUND

And SIGNATURE APPROVALS as required

Requesting a CHANGE to an existing fund:

Complete the following for all changes:
FUND

and SIGNATURE APPROVALS as required.

For a change in Custodian, complete:
CUSTODIAN

and CHANGE IN CUSTODIAN

For a change in Location, complete:
LOCATION

For a change in Fund Balance:
REQUEST TO CHANGE FUND BALANCE

CUSTODIAN INFORMATION Complete all information. If this is a new fund, check the 'New' box. If a change in Custodian, check the 'Existing' box and complete the information for the NEW custodian.

USNH ID: is necessary to establish the Custodian within Banner

USER NAME: the user name used to log into Banner allows the USNH Controller's Office to verify approval authority and contact the Custodian via electronic mail.

DEPARTMENT NAME and CAMPUS ADDRESS should be where the Custodian may be reached.

FUND IDENTITY Enables each fund to be specifically identified. If this is a new fund request, enter the TITLE you would like used and leave the FUND# blank.

Title of Fund: How you identify the fund in your own area

FUND #: the number assigned to the fund when initially created (assigned by the USNH Controller's Office)

LOCATION/PURPOSE Refers to where the funds, or the check book if a checking account, will be physically located. If this is a new fund, check the 'New' box. If a change in location, check the 'Existing' box.

BUILDING, ROOM NO. and SECURITY show where the funds are and the means available to safeguard them. Petty cash should be secured in a locked strong box in a locked desk or cabinet whenever not in use. Change funds should be in a cash register, safe, or locked strong box at all times. Departments not in possession of a locked box or safe should write "strong box needed"; the Controller's Office will issue a strong box for a nominal fee.

RESPONSIBLE FOAPAL is the department's operating account.

DOLLAR AMOUNTS set the initial balance and show expected activity.

FUND This requests information about the type of fund being requested, its purpose and the name printed on all reports. If this is a request for a new fund, check the 'New' box and complete all information, except the FOAPAL, this is assigned when the fund is created. If this is a request for a change in Custodian, Location, Balance, etc. check the 'Existing' box and only complete the FOAPAL. This will provide enough information to identify the fund being changed.

TYPE OF FUND and TERM OF FUND indicate what fund is being requested and its termination date, if any.

PURPOSE - briefly describe why this fund is necessary, and how the funds are to be used.

INCREASE/ DECREASE AMOUNT show the amount you are requesting an increase/decrease for, what this will make your new fund balance equal to, and explain why this is necessary. If you are increasing the balance, check the 'Increase Fund Balance' box. If you are decreasing or closing the fund, check the 'Decrease or Close Fund' box.

Increase/Decrease Amount is the total change in the fund's balance. How much are you asking to add to you present fund, or how much are you planning to deposit with the Business Office.

Current Fund Amount through New Fund Amount show the amount that your fund is currently authorized for, add/subtract the increase/decrease being requested. This should give you the new balance for your fund.

Reason for Change describes why this change is necessary. Please indicate if this is a temporary change, or if you prefer it to be a permanent change.

Date of Deposit is for decreases or closing funds only. When you make the deposit of excess funds to the Business Office, note the date, and attach a copy of the cashier's receipt.

CHANGE IN CUSTODIAN is to help the department with a clean transfer. The Former Custodian should reconcile the fund to the last date of his/her responsibility. This would include processing any Replenishment requests and bringing the fund to its normal cash level. Information on the New Custodian should be completed in the CUSTODIAN section, above.

SIGNATURE APPROVALS show authorization to request any new funds or changes to existing funds. Departmental Custodians should retain all signed copies of Cash Fund Request forms in their cash fund records. The USNH Controller will assign a unique Petty Cash/Change Fund Control Number if a new fund is approved; this number should be included with all subsequent requests or correspondence concerning the fund.

Custodian must always sign for any new fund or a change to an old fund. If this is a request to decrease the fund balance, no further authorizations are necessary.

Department Head is required for a change in custodian or closing a cash fund.

Department Head and Campus Chief Financial Officer is required for new funds and all other changes to the fund. USNH

Controller All Cash Fund Request forms must be signed by the USNH Controller or his/her designee to be valid.

USNH Treasurer must also sign if the fund, including any increases and decreases, is to be over \$500 or if an imprest checking account is requested.

Chancellor must sign if a checking account is required.