



Cash Fund Person Change

ROUTING
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Please review the Business Procedure Manual (BPM) at www.nmsu.edu/-boffice/bpm for policies and procedures affecting cash fund custodian/responsible person changes.

PURPOSE – To account for cash fund custodian/responsible person change each time a change fund is assigned to a new fund custodian and/or responsible person.

Processing Flow:

- Cash Fund Custodian identifies requested change and fund type being changed
- Cash Fund Custodian provides request date, department, MSC, phone number and total cash fund
- Cash Fund Custodian and/or Responsible Person prints and signs name showing obligation of cash fund is being released from them
- New Cash Fund Custodian and/or Responsible Person prints and signs name
- Transfer of the Cash Fund Custodian and/or Responsible Person must be witnessed by an individual and the witness needs to print and sign their name
- Approval of the transfer must be approved by the Responsible Person and/or Department Head by printing and signing their name
- The Cash Fund Custodian/Responsible Person Change Form must be submitted to University Accounts Receivable (UAR) – MSC 4570

SECTION 1: REQUESTOR INFORMATION

Requestor Name: _____ Phone: _____ E-mail Address: _____

Department Name: _____ MSC: _____ Request Date (mm/dd/yyyy): _____

SECTION 2: REQUEST DETAILS

Total Cash Fund: \$ _____

Requested Change:

- Fund Custodian (Person responsible for Fund on a Daily Basis)
- Responsible Person (Supervisor of Person Responsible for Fund)

Fund Type Being Changed:

- Petty Cash Fund (103361-111200) – for incidental minor departmental purchases
- Temporary Change Fund (103360-111300) – for providing change for an occasional event
- Permanent Change Fund (103357-111100) – for providing change for on-going daily operations

Obligation of this cash fund is being released from: Custodian Responsible Person

Print Name: _____ Signature: _____

Obligation of this cash fund is being assigned to: Custodian Responsible Person

Print Name: _____ Signature: _____

This transfer has been witnessed by:

Print Name: _____ Signature: _____

SECTION 3: REQUESTOR APPROVAL

Responsible Person/Department Head Printed Name _____ Signature _____ Date _____

Business Office Approval _____ Date _____

Reset