

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

TO: Comptroller

FROM: \_\_\_\_\_

SUBJECT: Request to Increase/Decrease/Close Petty Cash/Change Fund

I request that (Department Name) \_\_\_\_\_ to \_\_\_\_\_  
its petty cash/change fund from (current amount) \$ \_\_\_\_\_ to (new amount) \$ \_\_\_\_\_.

Justification for proposed use and estimated monthly transactions is as follows:

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

I agree to operate the petty cash/change fund in full compliance with UOG's Petty Cash/Change Fund procedures. I also authorize the University to deposit the funds via direct deposit as indicated below. The petty cash/change fund and records will be available for any scheduled and/or unannounced audits.

The fund custodian will be, (Name) \_\_\_\_\_, (Phone Number) \_\_\_\_\_.

The designated alternate custodian during the absence of the fund custodian is (Name) \_\_\_\_\_, (Phone Number) \_\_\_\_\_.

The cash and records for this fund will be located in (Building and Room Number) \_\_\_\_\_ and will be safeguarded in the prescribed procedures.

\_\_\_\_\_  
Petty Cash/Change Fund Custodian

\_\_\_\_\_  
Alternate Petty Cash/Change Fund Custodian

\_\_\_\_\_  
Dean/Administrator

\*\*\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\*\*\*

Approved

Disapproved

\_\_\_\_\_  
Comptroller

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