



VCU Treasury Services

PETTY CASH ACTION FORM

Date: 4/22/2021 Amount \$2000 Fund Type: Change Fund Participant/Patient Study

Custodian Name:	<u>Miriam Jacskon-Jones</u>	Email:	<u>mjjjon123xs@vcu.edu</u>
Department Head:	<u>Jackson Smith Example</u>	Email:	<u>jsjohnson223@vcu.edu</u>
Designated Approver(if applicable)	_____	Email:	_____
Study/Sponsor/Grant (if applicable):	<u>Name of Study or IRB #</u>	Department:	<u>VCU Department Name</u>
Campus Mailing Address:	<u>Dept PO Box Num 8400xx</u>	Telephone:	<u>804-828-1xxxx</u>
Location of Funds (Building, Room #):	<u>Grace House, 200 Franklin St, 2nd Floor Rm 213</u>		

Type of Action Requested:

1. Establishment of a New Fund (complete Attachment A)
- Funds needed indefinitely
- Funds needed for the specific period of time ending 9/30/2022

2. Alteration to a Fund
- Increase to an existing fund (complete Attachment A)
- Decrease to an existing fund (complete Attachment A)
- Closure of fund (complete Attachment B)

3. Change of custodian (complete Attachment B)

Old Custodian: _____ Effective Date: _____

New Custodian: _____ Email: _____

- 4: Change of fund location (complete Attachment A)

By signing below, I agree that I have read, understand and will comply with the [Petty Cash](#) policy. I agree that I will notify Treasury Reporting of any overage or shortage and of a change in custodian, department head, or designee. I understand that I am solely responsible for the safekeeping of the petty cash funds and for the reimbursement of the petty cash funds. I understand that I shall close the petty cash fund as soon as possible when it is no longer needed.

Custodian Signature:	Use Dou Signature	Date:	4/22/2021
Dean/Department Head Signature:		Date:	
Designee Signature (if applicable):		Date:	

Email completed form to: tresreport@vcu.edu

For Use by Treasury Reporting Only

Approved By:		Date:	
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Senior Manager, Treasury Reporting



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Attachment A

Request for New/Increase/Decrease Petty Cash or Change Fund

This is a fillable form. Click on the View tab and select edit document.

New/Original Fund Amount: \$2000

Increase: \$

Decrease: \$

New Fund Amount: \$2000

Justification for the proposed use of a new/increased Petty Cash or Change Fund and estimated average and frequency of expenditures:

Nature of Expenditure	Average \$ Amount	Frequency
Example 10 participant pymt at \$20 each	\$200	Weekly
10 participant pymt at \$10 each	\$100	Bi Weekly
20 participant pymt at \$25 each	\$500	Monthly

If payments are being made to test subjects, please provide a copy of your procedures for documenting the receipt of payments, etc.:

Type in name if Study with IRB#. Participants will complete W9 form when issue cash or gift card after survey is complete.

Petty cash funds are highly susceptible to theft. These funds must be properly secured at all times. Cash boxes should be locked when not in use. Keys to cash boxes and file cabinets where cash is stored should be secured away from the locked devices (not in the same office) or carried with the custodian. Safe doors should be kept closed during working hours and locked at times when it is not necessary to be in and out of the safe.

Explain how the funds will be safeguarded:

Petty cash funds, receipts and checks will be locked up in cash box in a secure desk or cabinet in a locked office

If requesting a Change Fund, please include a copy of your procedures for management of the fund.

Custodian Name: Miriam Jacskon-Jones Date: 4/22/2021

Custodian Signature: Use Dou Signature