

Bursar

Imprest Request Form:

To request a new Imprest Account please complete this form in its entirety:

Department Name: _____

Custodian Name: _____ Home Address: _____

Custodian phone number: _____ Access ID name: _____ E-mail: _____

FOAP number: _____ Amount Requesting: _____ TU ID #: _____

Please indicate in full detail the purpose and need for this fund:

Please describe in full detail how the funds will be maintained and secured in the custodian office:

Indicate if this fund will be used to make subject payments. Yes _____ No _____

If yes; list the amount to be paid to each subject. _____

If yes; you must agree to the below statement. Please place your initials at the end of the statement.

No one participant's payment will exceed \$600 in a calendar year. If a participant receives more than \$600 in a calendar year the custodian will submit the participant's taxable information (i.e. name, social security number, etc.) to Accounts Payable. No TU employee will receive funds from the petty cash for their participating in the study. X

Supervisor's Signature: _____ Access ID Name: _____

Supervisor's name / phone number / email: _____

Affirm: I have read Temple University's **Petty Cash Policy** and accept responsibility for safekeeping and handling these funds.

Custodian Signature: _____ Date: _____

Accounts Payable: _____ Date: _____

Grant Accounting: _____ Date: _____

Bursar's Office: _____ Date: _____

Once the form is completed, please e-mail the form to Lezlie.Jiles@temple.edu.