

Bursar

## **Imprest Account Informational Change Form**

Department Name:		
New Custodian:		
Custodian phone number:	fax:	email:
New Center Number and FOAP number:		_
Total Petty Cash Amount:		_
Amount of Cash on hand:		_
Amount of receipts on hand:		
Please indicate in full detail the purpose and need for this fund:		
Please describe in full detail how the funds will be maintained in the custodian office:		
Supervisor's Signature:		date:
Supervisor's name / phone number / email:		
<b>Affirm</b> : I have read Temple University's <b>Petty Cash Policy</b> and accept responsibility for safekeeping and handling these funds.		
Custodian Signature:		date:
Temple University Bursar:	date	:

Once the form is completed, please e-mail the form to hope.wardell@temple.edu  $\,$