



Departmental Petty Cash Custodial Form

Name (please print): _____

Department: _____ Phone: _____

Amount: _____

I acknowledge that I have received the amount noted above in petty cash and am designated as the Petty Cash Custodian for the indicated department. I also acknowledge that I have read and understand the Departmental Petty Cash Policy provided separately.

Signature: _____

Date: _____