



BRIGHAM YOUNG UNIVERSITY
Application for Change Fund

Department & College _____ Est. Completion Date _____

Custodian Applicant _____ Email _____

Amount Requested _____ Address _____

Purpose _____

Change Account # - 1080 - (To be assigned by Treasury Services)

POLICIES AND PROCEDURES

1. A change fund will be issued to staff members responsible for the operation of a university facility or an activity involving sales and cash receipts. The person requesting the fund is personally liable for the change fund. If the funds are lost or stolen, he/she must immediately contact Financial Services and the University Police.
2. Send this application to cashfunds@byu.edu. Keep a duplicate copy for your files. If it is approved, allow 5 (five) days for the processing of a check or voucher.
3. Request only the amount required to conduct a normal day's business.
4. **Do not use this change fund for purchases, loans, wages, or check cashing.**
5. When the fund is no longer needed, deposit the change fund at the Cashier's Office (D-155 ASB) to the change fund account.
6. If custodian responsibilities must be transferred to a new individual or the fund must be terminated, this Change Fund should be turned in at the Cashier's Office to the change fund account, or the successor can apply to have funds transferred to his/her name.
7. Financial Services will send a change fund balance confirmation letter to the change fund custodian annually. The University's Internal Audit Department will conduct periodic unannounced audits of the fund.

If this application is approved, I agree to accept personal responsibility for the fund, and if lost, I will become liable to the University. I further agree to comply with the policies and procedures as set forth above.

Signed

Custodian Applicant

Signature Date

Controller Approval

Signature Date

Financial Services Approval

Signature Date