Note: Some features may not work when completing the form in the browser. Please download forms to a PDF before entering information. All forms are downloadable PDFs.

FI 10 07/2022 Division of Finance

Email completed form to fvendor@utah.gov For questions, call (801) 957-7760



Department Name

Division

Dept. Contact

Effective Date

Phone

## **ACCEPTANCE OF CASH CUSTODY FORM**

Type of Fund:	Petty Cash	Travel	Change	Other					
Type of Transaction Establishing a new		n New Fund g a fund requi	Increas ires an appro		Decrease Fundating the amount		ansfer Fund nd/increase and	Close Fund reason.	
				Origi	inal Amount of Fu	und			
Custodian of Fund	Increase/Decrease Amount								
	Revised Amount of Fund								
Custodian Vendor N	Number (Assigned	d by Finance)			ecking count				
Office Address					* Ind	licate name	of bank & bank acco	ount #	
				Purp	ose				
City	State	e Zip							
Former Custodian (	Name)								
Former Custodian Vendor Name									
I agree to be responsible for and to maintain the fund in the amount shown above in accordance with the policies and procedures established by the Director of Finance.									
Custodian of Fund (Signature)					 Date				
State Treasurer N	lame :	State Treasu	rer Title	Departi	ment Head/Agen	t Name	Dept Head/Ag	ent Title	
State Treasurer Approval to Open Checking Account				– ——— Departr	Department Head or Authorized Agent Signature				
TO BE USED BY THE DIVISION OF FINANCE ONLY									
Completed by				Da	ate				