

Johns Hopkins University
Accounts Payable Shared Services – Petty Cash Unit
Petty Cash Action Form

PART I: ESTABLISH FUND

Statement of Purpose: _____

Department Name _____ Project Name and Funding Agency (if applicable) _____

Room & Building (if applicable) _____ Off-Campus Location of Remote Funds (if applicable) _____

Business Area: _____ Operating Fund: _____

Check One: ☐ Cash Till ☐ Domestic Checking ☐ Remote Checking

Amount Requested _____

Print Custodian Name _____ Telephone # _____ Employee I.D. _____ E-mail Address _____

Print P/C Administrator Name _____ Telephone # _____ Employee I.D. _____ E-mail Address _____

PART II: CHANGE FUND

- | | |
|---|--|
| <input type="checkbox"/> Increase Amount of Fund | <input type="checkbox"/> Decrease Amount of Fund |
| <input type="checkbox"/> Change in Administrator or Custodian (requires B-34) | <input type="checkbox"/> Change in Cost Center or Internal Order |
| <input type="checkbox"/> Change in Location | <input type="checkbox"/> Other |

Cash Journal # and/or Bank Account Name: _____ P/C General Ledger #: _____

Prior Information: _____ New Information: _____

Prior Information: _____ New Information: _____

Explanation: _____

PART III: CLOSE FUND

Cash Journal # and/or Bank Account Name: _____ P/C General Ledger #: _____

Custodian Signature _____ Date _____ P/C Administrator Signature _____ Date _____

Divisional Business Office Approval _____ Date _____ A/P Petty Cash Unit Processor _____ Date _____

All Petty Cash changes and closing of fund, except change in location, require a reconciliation of the fund (B-34) and the signature of the Petty Cash Custodian and Petty Cash Administrator. To ensure a quick turn around, the form should be emailed to Luke Samuel, rsamuel8@jhmi.edu in Accounts Payable Shared Services; although, a paper copy through the mail will be accepted.

Accounts Payable Shared Services – Petty Cash Unit
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