

Instructions: Complete form and transmit
to Project Administrator

Project Identification

Project Title	PRSY	G/L code
Address	CUNY Unit	

Proposed Custodian(s)

Name-Print 1.	Position	Signature
Name-Print 2.	Position	Signature

1. Amount Required:	\$ _____
2. Why is cash fund needed?	_____ _____
3. For what period is the cash needed? From	___/___/___ to ___/___/___
4. What safekeeping measures will be used?	_____ _____

I certify that I am the Project Director/Principal Investigator of this project and accept the responsibility to give full accounting for the petty cash advance.

Signature

Date

Approval (RF use only)
