



### Permanent Working Fund Request

Texas A&M University - College Station  
Texas A&M University - Galveston  
Texas A&M University System

Custodian Name: \_\_\_\_\_ Vendor Number (ssn): \_\_\_\_\_

Position or Title: \_\_\_\_\_

Department: \_\_\_\_\_ Mail Stop: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Backup Custodian Name (if applicable): \_\_\_\_\_

Position or Title: \_\_\_\_\_

Department: \_\_\_\_\_ Mail Stop: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please establish a working fund in the amount of \$ \_\_\_\_\_ from account \_\_\_\_\_.

Funds are to be made available on \_\_\_\_\_.

The purpose of this working fund is:

I hereby acknowledge responsibility for the working fund described above. As fund custodian, I understand and accept the fact that I am personally responsible for all funds entrusted to me until the monies are returned to Financial Management Operations or until I am relieved of that responsibility by the completion of a transfer of the funds to another individual by means of a transfer of custody form.

I understand that I must certify the continued need for these funds annually.

I confirm that I have read and understand Texas A&M University System Regulations 21.01.02 Receipt, Custody and Deposit of Revenues <http://policies.tamus.edu/21-01-02.pdf> and 21.01.11 Working Funds <http://policies.tamus.edu/21-01-11.pdf>. I am responsible for the safety and accountability of the funds.

I confirm that my department has written procedures in place and all employees that are involved with the working fund are familiar with these procedures.

Fund Custodian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Backup Fund Custodian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

APPROVED: \_\_\_\_\_ Date: \_\_\_\_\_  
Department Head or Designee Signature

FMO APPROVAL: \_\_\_\_\_ Date: \_\_\_\_\_  
FMO Director

SUBMIT COMPLETED FORM TO:  
FMO General Accounting  
MS 6000

NEED HELP?  
FMO General Accounting  
Phone: (979) 845-4001

For FMO Use ONLY

Accounting Entry Only: 104/109  
GL# \_\_\_\_\_ -1125

Voucher # \_\_\_\_\_