



Permanent Working Fund Transfer of Custody Request

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

New Custodian Name: _____

Position or Title: _____

Department: _____ Mail Stop: _____ Office Phone: _____

Email: _____

Please transfer the working fund in the amount of \$ _____ from _____ to _____
Current Custodian

New Custodian

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.

New 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