



CASH OVERAGE/SHORTAGE

This form is used to document identified cash overages/shortages. Refer to the University's Cash Handling Policy for more detail.

Department: _____

Department Head: _____

Cash Collection Location: _____

Custodian Name: _____

\$ _____ Shortage

(Note: If over \$5.00, notify the Office Finance, Administrative Services and Operations and the Internal Audit Department immediately.)

\$ _____ Overage

Explanation:

Authorizing Signatures

Custodian

Date

Department Head

Date

For Finance and Administrative Services Only

Receipt Date _____

Initials: _____