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| University of Maryland Department of \_\_\_\_\_ |
| To: | Kathy Moody |
| From: | Rebecca I Hunsaker |
| CC: | Working Fund, Becky Leffson Matthews, Rebecca Hunsaker |
| Date: | [Pick the date] |
| Re: | Working fund check closeoutPI: TAR: Purpose for Advance:  |
| Comments: | Attached please find receipts and documentation regarding working fund check number \_\_\_. |
| Custodian Certification: | By signing below, I certify that the attached documentation is accurate and complete. Receipts are provided for all transactions. The balance of unspent cash is attached in the form of a personal check to the University of Maryland.  |
|  | In the event that cash has been distributed to other individuals as part of this working fund check, I certify that all cash was distributed in accordance with University of Maryland policy and each individual receiving cash has completed and signed a related receipt. |
| Custodian Name: |  | Custodian Signature: |  |
| Department Head Name:  |  | Department Head Signature: |  |
| Dean’s Office reviewer: |  | Dean’s Office Signature: |  |