

# Indiana University Custodial Fund Reconciliation

Custodian Name: _____	Bank Information (if applicable)
Payee ID: _____	Bank Name _____
Date of Reconciliation _____	Bank Account # _____
Department _____	Fund Amount _____

**CASH ON HAND:**

Currency	Coins	Cash Counted By: _____
\$1..... _____	.01..... _____	Count Witnessed By: _____
\$2..... _____	.05..... _____	
\$5..... _____	.10..... _____	
\$10..... _____	.25..... _____	
\$20..... _____	.50..... _____	
\$50..... _____	\$1.00..... _____	
\$100... _____		
Total Currency..... _____	Total Coins..... _____	

**TOTAL CASH ON HAND: \$ \_\_\_\_\_**

**ADD** Checkbook Balance (if applicable): \_\_\_\_\_ + \_\_\_\_\_

**TOTAL CHECKBOOK BALANCE AND TOTAL CASH: = \$ \_\_\_\_\_**

**ADD** Receipts on hand not yet filed for reimbursement: \_\_\_\_\_ + \_\_\_\_\_

**ADD** Other Items: (Detail required) \_\_\_\_\_ + \_\_\_\_\_

Disbursement Vouchers in progress		
Document # _____	\$ _____	
_____	\$ _____	
_____	\$ _____	

**ADD** Total Disbursement Vouchers: \_\_\_\_\_ + \_\_\_\_\_

**TOTAL FUNDS ACCOUNTED FOR: = \$ \_\_\_\_\_**

**SUBTRACT** Authorized Custodial fund Balance: \_\_\_\_\_ - \_\_\_\_\_

**Discrepancy** If this amount is not zero, please explain in detail \_\_\_\_\_ = \_\_\_\_\_

**FUNDS WITH BANK ACCOUNTS:**

**Please Attach:**

Detailed list of outstanding checks (include date of issue, amount, payee, payee address, & reason for payment.)

Bank Statement

Cancelled Checks

Bank Statement ending Balance: \$ \_\_\_\_\_ (attach detailed list)

**ADD:** Deposits in Transit: \_\_\_\_\_ + \_\_\_\_\_

**SUBTRACT:** Checks Outstanding: \_\_\_\_\_ - \_\_\_\_\_

Adjusted Bank Balance (Must equal Checkbook Balance) \_\_\_\_\_ = \_\_\_\_\_

*I certify that on \_\_\_\_\_, 20\_\_, I had in my possession and under my control \$ \_\_\_\_\_ in custodial funds and that these funds are being administered in compliance with campus policy and procedures.*

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

Prepared by: \_\_\_\_\_

Fiscal Officer Signature \_\_\_\_\_

Please complete this form monthly & return to:  
Aline Danielson, Custodian Fund Coordinator  
AO 120B, IUPUI (Fax # 274-2639)