

# REQUEST FOR CASH ADVANCE



I # \_\_\_\_\_

JV# \_\_\_\_\_

**Please note:**

\*If this request for cash advance is for more than \$ 50 it must be submitted to the Accounts Payable Office at least a week in advance of the date the request is needed in order to process the check. Checks are printed on Mondays and Wednesdays and are available after that time.

\* This advance must be cleared with the Business Office on a Travel Expense Voucher / Cash Advance Clearance with in **ONE WEEK** from the date travel was completed.

\* The employee is liable for the full amount of the cash advance until after the Travel Expense / Cash Advance Clearance form has been returned to Business Office.

\*If any amount is owed to Eckerd College the employee must pay the amount at the time they turn in the Travel Expense / Cash Advance Clearance form.

Name		Address to send check to
Department		
Employee/Student ID #		
Date:		Date Cash to be Used

Purpose of travel		
Fund	Acct	Amount Requested
11001	11495	

Purpose for cash advance if not travel		
Fund	Acct	Amount Requested
11001	11495	

Purpose for cash advance

Claimants Signature	Date:
Departmental Budget Approval	Date:
Business Office Approval	Date:

CASHIER'S OFFICE (less than \$50)		
Cash Received By	Cashier	Date: