

# CASH ADVANCE FORM

Funds requested by **Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Amount:** \$ \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Date Needed By:** \_\_\_\_\_

**Reason for cash advance request:**

Please Remember: Obtain receipts for each expense and submit them with an expense report at the appointed time along with any leftover funds.

“I acknowledge my obligation to account for expenditures made and agree to submit expense reports and to return any unused advances to the University by \_\_\_\_\_. I hereby authorize and agree that in the event I should fail to comply with these obligations, Corban University may, in its sole discretion, withhold from my salary or wages all or any of the amount equal to the total amount not accounted for or returned.”

**Requester:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Supervisor Approval (If applicable):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Financial Services:** \_\_\_\_\_

**Date:** \_\_\_\_\_