

## NON TRAVEL ADVANCE REQUEST

	DATE	DATE	
ORGANIZATION			
	BUDGET OF		
	AMOUNT NEEDED		
REASON FOR ADVANCE			
MAKE CHECK PAYABLE TO			
budgetary limitations. We agree to provide rece	cessary for the operation of this organization and eipts covering all expenditures paid from this adva		
days, and to promptly return for deposit (to cre	dit of the organization any unused funds).		
	Requested by (signature)	Date	
	Requestor's Social Security #	Requestor's Social Security #	
	Authorized Signature	Date	
I hereby acknowledge receipt of the advance rethat a hold will be placed on my record and/or	equested above in the amount of \$account if receipts are not returned within 7 busing	I also acknowledge ess days from today.	
	Signature	Date	