



Cash Advance Request Form

PROCEDURE

1. Complete this form and obtain Department Manager's Signature/Approval- no stamps please.
2. Submit this form to travel@kennesaw.edu to request the cash advance.
3. Attach supporting documentation (including this Cash Advance Request Form)
 - Travel-related Cash Advances require a copy of the Request for Authority to Travel Form.
 - Non-travel Cash Advances require a memo or other documentation explaining the anticipated use of the cash advance.
4. Retain a copy of this form, and all supporting documents for your records.
5. Route the this form to travel@kennesaw.edu or mail to MD 9110 Business Services, Accounts Payable.
6. When the fully approved form and documents are received in Accounts Payable, the Cash Advance will be processed.
7. If applicable, return leftover funds to the Bursar's Office with a copy of this Cash Advance Request Form.
8. Submit Travel Expense Statement or check request (for non-travel expenses) and all required receipts for department approval.

Accounts Payable Use Only

Voucher #: _____

Vendor # _____

Employee Name: Sharon T. Carmichael	Amount Requested: \$2,000.00	Amount requested cannot be more than what is available in the agency account.
SpeedChart Number: A000123	Date Requested (mm/dd/yyyy): 04/23/2016	This is the date you would like to receive the funds.
Department: Education Abroad Office	If your program is administered by the Education Abroad Office, please complete your form as shown here. EAO is the approver for your program account funds.	Employee Phone Number: (470) 578-1234
Department Manager's Name: Iyonka Strawn-Valcy	Department Manager's Phone Number: (470) 578-7787	

CASH AVANCE INFORMATION

Attach a detailed breakdown of anticipated expenses.

General Purpose of Advance: To pay education abroad program related expenses while in-country.	
Trip Destination/Event: France	
DATE RANGE OF TRIP OR EVENT	
From (mm/dd/yyyy): 05/01/2016	To (mm/dd/yyyy): 05/20/2016

NOTE: Per the Board of Regents Business Procedures Manual (BPM)

4.9.7 Employee and Institution Accountability of Funds Advanced
 Each employee receiving a cash advance shall sign and date the travel advance authorization form acknowledging receipt of funds. All employees are fully responsible for funds advanced to them and shall account for the funds in accordance with the statewide travel regulations. Employees are liable for any advanced funds that are lost or stolen.

By signing below, employee acknowledges and understands that upon receipt of funds, the employee is responsible for the entire amount of this cash advance and will submit the necessary paperwork in a timely manner. Any advances not cleared within 60 days of the issued date, will be collected through the employee's payroll funds.

REQUIRED SIGNATURES

Original Signatures Required--No Stamps Please.

Employee Acceptance/Signature and Date:	Employee Name: Sharon T. Carmichael
Business Operations Professional/Manager's Approval/Signature and Date:	Business Operations Professional/Manager's Name: Leave this field blank. This section will be completed by EAO after you have submitted your request.
Department Manager's Approval/Signature and Date:	Department Manager's Name: Iyonka Strawn-Valcy
Cash Advance Administrator's Approval/Signature and Date:	Cash Advance Administrator's Name: Leave this field blank. This section will be completed by OFA when processing your request.

RETURNED LEFTOVER FUNDS

Amount Returned \$:	Date Funds Returned (mm/dd/yyyy):
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Your home department supervisor does not need to sign this form. If you are using funds from accounts outside of EAO, at the bottom of this form, please have the account holder (Business Manager) print and sign their name, list the account and the amount of funds that will be used from that account.

This section auto populates after you have completed the top part of the form.