

SAINT JOSEPH'S COLLEGE OF MAINE CASH ADVANCE FORM

ADVANCE REQUEST:

Print name of Person receiving the advance: _____

Signature recipient of advance _____

Date advance taken: _____ Amount of Advance: _____ (A)

Type (circle) Check Petty Cash

Date of event: _____ Purpose/Club: _____

Supervisor Approval Signature

Treasurer's Office Signature

FUNDS RETURNED:

Date Unused Funds Returned: _____ Amount Returned: _____ (C)

Spending Detail – **ALL RECEIPTS MUST BE ATTACHED:**

Description	Amount	Dept or Fund	Main Account
		_ _ _ _ _	_ _ _ _ _
		_ _ _ _ _	_ _ _ _ _
		_ _ _ _ _	_ _ _ _ _
		_ _ _ _ _	_ _ _ _ _
TOTAL SPENT		(B)	

Reconciliation:

Advance Taken: _____ (A)

Less Total Spent: _____ (B)

= Amount Returned: _____ (C)

Supervisor Approval

Date

Funds Returned By

Date

Treasurer's Office Signature

Date