



PREPAID TRAVEL ADVANCE REQUEST FORM

NAME: _____ DATE FUNDS NEEDED: _____

ADVANCE AMOUNT REQUESTED: \$ _____

FUNCTION/DESTINATION: _____

DEPARTURE DATE: _____ RETURN DATE: _____

SUPERVISOR SIGNATURE: _____ **DATE:** _____

I acknowledge receipt of monies shown above as personal liability until settlement is made by submitting an authorized 'Travel Expense Report' and return of any unspent funds to the OVU business office.

By signing below, I hereby authorize the Payroll office to deduct this advance from my paycheck if I have not submitted an approved expense report within 10 days of my return.

EMPLOYEE SIGNATURE: _____ **DATE:** _____

PURPOSE AND PROCEDURE:

Use this form when you anticipate needing to use cash on an authorized OVU business trip.

This form needs to be submitted to the Accounts Payable Manager for payment. In most instances, checks are processed weekly on Thursdays. This form must be submitted, with the appropriate signature, by 5 pm Tuesday to be included in the check run.

All receipts must be obtained for expenses paid for by these advanced funds. Upon return to campus, complete the 'Travel Expense Report' to provide a reconciliation of the funds. Any remaining cash from the advance should be submitted to the business office along with the 'Travel Expense Report'.