

Advance Payment Request Form

Project-Based Funds

Project Name	<hr/>
Project Code / ID	<hr/>
Requestor Name	<hr/>
Department / Team	<hr/>
Date of Request	____ / ____ / ____
Contact Email	<hr/>

Advance Payment Details

Purpose of Advance	<hr/>	
Total Amount Requested	Currency: _____	Amount: _____
Expected Utilization Date	____ / ____ / ____	
Expected Settlement Date	____ / ____ / ____	

Cost Breakdown

Description	Amount
_____	_____
_____	_____
_____	_____
_____	_____
Total	_____

Bank Details (if applicable)

Account Name	<hr/>
Bank Name	<hr/>
Account Number	<hr/>
Bank Branch	<hr/>

Requestor's Signature

Date: ____ / ____ / ____

Department Head
Date: ____ / ____ / _____

Finance/Accounts Approval
Date: ____ / ____ / _____

Important Notes:

- All advances are subject to approval and verification of supporting documents.
- Settlement of advance must be completed with original receipts by the settlement date.
- This form should be submitted before required project activities or procurements commence.
- Misuse or delay in settlement may result in suspension of advance privileges.
- Please attach any relevant quotations, approvals, or additional justifications if necessary.