

Standard Cash Advance Request Form

Employee Name

Employee ID / Department

Date of Request

Purpose of Advance

Amount Requested

Details of Estimated Expenses

Description	Estimated Amount
e.g. Travel, Meals	

Repayment Method

Approvals

Supervisor / Manager Name

Supervisor / Manager Signature

Date

Employee Certification

☐ I hereby certify that the information provided above is accurate and the requested funds will be used solely for company business.

Employee Signature

Date

Important Notes

- Cash advance requests must be approved prior to disbursement of funds.
- All expenses must be supported by corresponding receipts and documentation.
- Unused funds must be returned promptly along with a final expense report.
- Misuse of cash advance may result in disciplinary action.
- Ensure all sections of the form are completed accurately before submission.