

Cash Advance Settlement Document

Date _____ Document No. _____
Employee Name _____ Employee ID _____
Department _____ Designation _____

Details of Cash Advance

Advance Amount _____ Advance Date _____
Purpose _____

Expense Breakdown

Date	Description	Amount	Receipt Attached
_____	_____	_____	Yes / No
_____	_____	_____	Yes / No
_____	_____	_____	Yes / No

Total Expense _____

Settlement Summary

Cash Advance Received	_____
Total Expenses	_____
Balance to Return / Reimburse	_____

Prepared By _____

Reviewed By _____

Approved By _____

Important Notes:

- All expenses must be supported with original receipts.
- Settlements should be made within the stipulated timeline as per company policy.
- Any unspent amount must be returned with the settlement.
- Incorrect or incomplete submissions may delay reimbursement.
- For questions, contact the Finance/Accounts department.