

Ball State University
Request for Cash Advance

Accounting Office Only
Receivable # _____

Name _____ Direct Deposit
 Department _____ Mail to campus address
 Dates of travel: from _____ to _____ Will pick up at Accounting Office
 Purpose of trip _____ Destination _____

NO CASH ADVANCE WILL BE ISSUED FOR LESS THAN \$75.00

	Amount	
	Requested	Advanced
A. Cash Advance		
1. Lodging _____ nights at \$ _____ per night		
2. Subsistence _____ periods at \$ _____ per period		
Less meals included in registration fees or otherwise furnished:		
_____ breakfast(s) at _____ = \$ _____		
_____ lunch(es) at _____ = \$ _____		
_____ dinner(s) at _____ = \$ _____	()	()
3. Transportation		
a. Personal vehicle		
First 500 miles _____ miles at \$ _____ per mile		
Next 2500 miles _____ miles at \$ _____ per mile		
Add'l over 3000 miles _____ miles at \$ _____ per mile		
b. Public transportation _____		
4. Other expenses		
a. _____		
b. _____		
c. _____		
Total		

- B. Certification:** I understand that the amount of this cash advance constitutes a loan made to me by my employer and that this Request for Cash Advance shall constitute a written instrument to evidence such loan. I agree to settle this cash advance (the filing of the appropriate documents and the return of excess funds, if any) within 30 days of its intended use.
- C. Assignment of Wages:** If I do not make settlement as aforesaid, I hereby assign so much of my wages to Ball State University as may be necessary to repay in full any amount(s) owed, to be made from the first wages due me following the expiration of the said period of 30 days. This Assignment of Wages by me is revocable at any time by me upon written notice to Ball State University. The signature of the "authorized representative" of the University below shall constitute an agreement in writing by Ball State University to the Assignment of Wages by me.
- D. Loss of Privilege:** I understand and agree that if Ball State University is compelled to make use of the above Assignment of Wages in order to collect any debt(s) owed, I will forfeit the privilege to obtain cash advances thereafter.

Signature _____ Date _____

Accounting Office Only

Authorized Representative _____ Date _____

Date check to be written.

Checks for Cash Advances are issued 2 business days prior to the trip; if needed earlier, attach written justification.

Voucher Number _____