

Cash Advance Agreement
(To be attached to a Travel Reimbursement Form)

I hereby request a cash advance in the amount of \$ _____ for the period _____ to _____ (*start and end dates of trip*).

Date on which advance is needed: _____ (**allow 5 to 7 business days for processing**)

I understand that this advance is to be used for the purpose stated below and in accordance with the College Travel Policy and Procedures. I also understand that all expenses are to be submitted to the Accounts Payable Department on the Employee Reimbursement/Travel form, and that I am personally responsible for any expenses paid for from the travel advance that are not allowable according to College rules and regulations or those that are not supported by original itemized receipts.

Purpose of Advance: _____

GL Account Number: _____

In the event that I do not return the advance and/or properly account for the use of the funds within 30 days of the return of the trip the College may hold me personally responsible for the repayment of those funds. If necessary, the remaining amount of the funds advance will be deducted from my College Payroll according to applicable State and Federal regulations.

It is understood that I am unable to obtain another advance or reimbursement until this advance has been cleared.

In the event that I terminate my employment at Hampshire College, I agree to repay any portion of the cash advance outstanding at the time of my termination. It is at College's discretion as to whether the amount will be deducted from my final pay check or paid via personal check or money order.

Printed Name: _____ Employee ID: _____

Email: _____ Phone: _____

Signed: _____ Date: _____

Supervisor: _____ Date: _____