

UNION COLLEGE

ADVANCE REQUEST*

NAME _____ DEPARTMENT _____

EMPLOYEE I.D. _____ ACCOUNT NUMBER _____

PURPOSE, DESTINATION AND DURATION:

APPROVALS

EMPLOYEE SIGNATURE DATE

ACCOUNT DIRECTOR SIGNATURE DATE

ADVANCE IS REQUESTED:

BY CHECK \$ _____

IN CASH \$ _____

SIGNATURE OF PERSON RECEIVING CASH DATE

***Advance requests may not exceed \$125.00.**