

Cash Advance Request

	First	MI	Date Requested
Employee ID#	Date Requir	red (allow 3-5 work	days)
Contact Phone	Email	address	
Amount Requested \$		**Cash Advance Limit o	f \$7,500.00.
Specific Reason(s) for C	ash Advance:		
Date of scheduled return	n from trip:		
responsibility for completing	g the necessary docum	nents for requesting and	orgia Gwinnett College business. I accept the d finalizing this cash advance. I agree to rep
	ve (5) business days (of my return. Remaini	ng funds will be submitted to Student
Accounts. Dept/ Sport	—	of my return. Remaini	ng funds will be submitted to Student
Accounts.	— —	of my return. Remaini	ng funds will be submitted to Student Date
Accounts. Dept/ Sport			
Accounts. Dept/ Sport Payee Signature		 ation)	

 $\begin{center} \textbf{Documents Attached} \end{center} (game schedule, team roster \& applicable student listing)$

 All efforts should be made for hotels and transportation to be paid via PCard or Payment Request.