E. Cash Advances

Advance Date	Advance #		Description			
Amount	Speed Code	Account #	Fund	Department ID/Org	Program	Project/Grant

Total Expenses E	k	$

Explanation of Policy / Procedure Exceptions

Approvals (Expense Reports missing Approval Signatures will be returned)

CLAIMANT:
I certify that all expenses submitted are reasonable and in accordance with university policy and will not be used as claims to other organizations for income tax purposes. Expenses reflect due regard for value for money, and personal expenses have been deducted. Exceptions to policy have been explained in writing and outstanding Cash Advances and prepaid expenses have been accounted for.

Print Name	Signature	Date

ACCOUNT HOLDER / PRINCIPAL INVESTIGATOR (Research Projects Only)
I certify that these expenses are in accordance with the budget of research project and they adhere to the policies and procedures of the granting agencies).

Print Name	Signature	Date

BUDGET UNIT HEAD/DESIGNATE:
I certify that the expenses are for University purposes only, and are in accordance with University policy. Exceptions to the Policy, which are documented by the Claimant, are reasonable under the circumstances.

Print Name	Signature	Date