

# WPOSC Cash Advance Request



Date Submitted: \_\_\_\_\_

Check Payable to: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Purpose of Cash Advance

Requested Amount \$ \_\_\_\_\_

Committee/Activity to be Charged: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

*Committee or Activity Chair*

*I understand by requesting a cash advance that I will be held accountable for the funds until original receipts are returned to substantiate the monies were spent according to WPOSC guidelines and/or the funds are returned to the Administrative Treasurer for deposit. I understand that my failure to account for advanced funds in full within thirty days will result in a debt owed to the WPOSC equal to the amount requested.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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*For WPOSC Administrative Treasurer's Use Only:*

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

*WPOSC Admin Treasurer*

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

*WPOSC President*

Date Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Initials: \_\_\_\_\_

Check Mailed ? Yes No Date: \_\_\_\_\_ Signature: \_\_\_\_\_