

PLEASE NOTE: Use this form for CASH ADVANCES ONLY. Do not use for Reservation/Registration or Admission fees.	CASH ADVANCE REQUEST FORM North East School District North East, PA	Date: _____
CHECK PAYABLE TO: _____ (Employee)	REQUESTED BY: _____	
ADDRESS: _____		ZIP: _____
NAME OF CONFERENCE/FIELD TRIP: _____		DATE OF TRIP: _____
DESTINATION: _____		
Mileage _____ @ <u>.655¢</u>	<u>Amount</u> \$ _____	REMINDER: All travel receipts must be attached to the travel reimbursement request form (pink) following completion of trip. APPROVAL: _____ APPROVAL: _____ PO #/Account #: _____ Date Approved: _____
Other Travel Expenses.....	\$ _____	
Meals.....	\$ _____	
Room.....	\$ _____	
Miscellaneous.....	\$ _____	
TOTAL.....	\$ _____	
Advance Requested? Yes _____ No _____		PO #/Account #: _____
Amount of Advance Allowed – 75%.....		Date Approved: _____
Revised June 2023		

(Blue Form)

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