**TRAVEL CASH ADVANCE REQUEST FORM**

*Please complete this form and upload it, along with the* ***Travel Cash Advance Agreement****, to Compass. If you have any questions, please contact Accounts Payable at:* *credit.cards@emory.edu*

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| **ISSUE TRAVEL ADVANCE TO:** |
| **DATE** |  | **APPROVED BY:** |
| **NAME** |  | **SIGNATURE** |  |
| **EMPLOYEE ID #** |  | **PRINTED NAME** |  |
| ***Travel Cash Advances are issued to employees in the same manner as their Emory paychecks.*** |
| **TRIP INFORMATION** |
| **Date of Travel**  | **From:**  |  | **To:**  |  |
| **Destination**  |  |
| Destination: |  |
| Destination: |  |
| **Purpose of Trip:**  |  |
| **Reason for Advance**  |  | *Check the applicable box to note the advance reason.* |
|  | The employee is not eligible for a Corporate Credit Card. |
|  | The employee has applied for but not yet received the Corporate Credit Card.  |
|  | The employee is traveling to a destination that might not accept corporate credit cards. |
|  | The employee does not have a personal credit card.  |
| **PAYMENT INFORMATION** |
| **Department No.**  |  |
| **Department Name** |  |
| **Speed Type #** |  |
| **AMOUNT REQUESTED** |
|  | **Expense to be paid with the travel advance:**  | **Estimated Amount** |
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|  | **TOTAL AMOUNT REQUESTED:**  |  |
| **SPECIAL INSTRUCTIONS OR COMMENTS** |
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