



Advance Request

(For Employees Traveling with Student Groups Only)

Banner ID Number _____

Date _____

Employee Name _____

AP Use Only
Fund 110000 Account 1271

Address _____ or _____
Campus PO/Dept. Street/City/State/ZIP

Check if an *Accounts Payable* Direct Payment Authorization is on file **(not the same as *Payroll* Direct Deposit)**

Amount Requested \$ _____ **Allow 5-10 business days for processing**

Dates of Travel _____ Destination _____

Business Purpose for Expenses _____

ADVANCE BUDGET

Itemized Estimate of Expenses (number of students, meals, etc.)	Amount
TOTAL	

To ensure compliance with IRS regulations, College policy requires that employees adequately account for advances within **30 days of the date of the advance**. Please submit a **Reimbursement Request form** to the Business Office with repayment of any excess funds and documentation of expenses including original *itemized* receipts, mileage logs and business purpose substantiation. Separate advance requests must be submitted for each trip. A second advance cannot be made if a prior advance is outstanding.

Expenses and acceptable documentation must be in compliance with Concordia's travel and business expense policy (available at the Business Office website).

I hereby certify that the above advance is for official college business and that the full amount will be repaid. By signing below, I agree to account for this advance within 30 days of the date of the advance. I also understand that my failure to account for the advanced funds within 60 days will result in forfeiture of my ability to receive future advances and will be reported as taxable income on my W-2 Form as per IRS requirements.

Signature

Date

Approval by Department or Division Head

Date