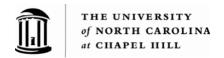


## 307.1.1f - Application for the Advancement of Institutional Trust Funds

Refer to OSR Policy 500.14 – Cash Advances (for requesting cash advance from Contract and Grant Funds)

Issue Advance to Full Name:	Amount of Cash Advance:			
Justification of Amount Requested				
Purpose of Cash Advance (list or describe the anticipated use of cash advance):				
Supporting Document (What generated this request, awar copy):	rd directive, department program, email, attach			
Settlement documentation supporting this request (Exampletc.):	ole: gift card receipt, copy of award certificated			
Describe physical safeguards of cash or gift cards purchased from cash advance yet to be distributed				
Department Contact Name and Title:				
Bopartmont contact value and ride.	Business Unit: Fund:			
	Source: Account:			
	Dept. ID: OSR Project ID:			
Email:	Date:			
	Date.			
Phone:	Fax:			

This form should be submitted with a Cash Advance Voucher.



## 307.1.2f - Cash Advance Agreement

I	unc	derstand that the \$	cash
	by the University of Nornsible for all moneys ad	th Carolina at Chapel Hill is vanced to me.	s a loan and that
I agree to provide app	propriate receipts for disl	bursements incurred no late	er than
	and deposit w	vith the University Cashier a	any remaining
cash into the following	g chartfield string:		
Business Unit:	Source:	Fund:	
Account:	_ Department ID:	OSR Project ID	:
may notify Payroll Se the date the receipts	rvices to deduct the amo were due to Accounting	ndvance, I hereby agree that bunt from my next salary ch Services. I hereby subscri ement carefully and agree t	neck following be by my own
Employee Signature		Date	
Principal Investigator	Signature	Date	
Office of Sponsored F	Research Signature	Date	
Γhis form should be submit	tted with a Cash Advance Vo	ucher.	