# TRAVEL ADVANCE AGREEMENT

I,  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** employee of the University of Arkansas Cooperative Extension Service, request a travel advance in the amount of **$\_\_\_\_\_\_\_**to be used for the payment of expenses in connection with official out-of-state travel to be performed by me as authorized by the University of Arkansas Cooperative Extension Service.

I agree that this amount is to be deducted from my travel reimbursement and the execution of this form is intended to be an assignment by me of the reimbursable amount to the extent of the travel advance set out above.

I also agree that my travel reimbursement claim showing expenses incurred will be filed with the Financial Services **WITHIN FIVE BUSINESS DAYS** after completion of this travel. I will repay at that time any amounts advanced to me but not expended on official travel on behalf of the University.

In consideration of the receipt by me of these funds in advance of the expenditure thereof, I agree that (1) in the event that I fail to file a reimbursement claim and show the expenditures thereon which I actually incurred and/or (2) in the event that I do not expend all of said advance for official travel on behalf of the University as authorized, the University may reimburse itself by withholding an equivalent amount from my subsequent payroll checks, or from monies which may be payable to me by the University.

**TRAVEL DATES**:

**DESTINATION:**

|  |  |
| --- | --- |
| Section to be completed by employee | |
| Signature: |  |
| Employee ID #: |  |
| Title: |  |
| Headquarters: |  |

|  |  |
| --- | --- |
| **FOR BUSINESS OFFICE USE ONLY** | |
| Credit Memo Number |  |
| Amount of Advance | $ |
| Credit Memo Amount | $ |
| Net Due from Employee | $ |

|  |  |
| --- | --- |
| **APPROVED:** |  |
| **Title:** |  |