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Advance Request

To be completed by department : Submit to Cashier for Advance

Requisitioned Information :

Name/Surname :ID No.:.....

Amount Requested in Riel :

Amount in words :

Reasons for Advance :

.....

.....

Requested by :

Accepted by :

Approved by :

.....

A/P No. :

Date :

ADVANCE PAYMENT

Pay toID No.:.....

Methods of Payment

☐ Cash

☐ Bank Transfer, Bank name.....

☐ Check Check No.....

Sum of

Amount in words

Paid by :

Received by :