



SCANMAR/SKANFIL MARITIME SERVICES INC.

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CASH ADVANCE/PAYMENT REQUEST FORM

Date : _____

Vessel : _____ Principal: _____

Crew Code	Rank & Name of Crew	Amount (PHP/USD)	Signature
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

TOTAL AMOUNT: _____

Purpose of requesting a Cash Advance:

- () Personal needs prior to embarkation on _____ (joining date).
- () Payment for visa _____ on the Port of Entry _____
Immigration, since I/we are traveling without joining visa.
- () As Travel Allowance to final Port of Destination in _____ prior to
boarding vessel. I understand that official receipts are necessary in order to liquidate the Travel
Allowance which is subject to Principal's approval.
- () OTHERS (please specify):

It is hereby understood that the above Cash Advance received this _____ (date) will be
liquidated or will be payable through salary deduction in full on my first (1st) Home Allotment.

BANK DETAILS

Account Name: _____

Bank/Branch: _____

Account Number: _____

☐ USD ACCT☐ PHP ACCT

Approved by:

Crew Manager

This portion has to be filled-out for any cash advance/s which is above the set limit and must be approved by Management.

Approved by:

Management