

Requisition # _____

Only State employees may request an advance. This form must be submitted **4 weeks** prior to travel date.

I would like to request an advance to help sustain some of the out of pocket expenses for traveling on company business.

Name _____

Home Address _____

City _____ State _____ Zip _____

Travel Dates: _____ Destination: _____

Amount requesting: \$ _____

(Min \$100 - Max \$400)

In the event of my resignation or separation for the service of the State or failure to account, the State of New York shall be immediately entitled to the return of the sum advanced to me or any part thereof.

The state may deduct said amount from any monies due or accruing to me from the State, at the time of my resignation, separation, and transfer to non-travel status or failure to account. If there are not sufficient monies due or accruing to me from the State at the time of my resignation or separation, or if I shall fail to promptly account, the State may enter judgement against me without further notice to me for the sum still owing by me to the State of New York, as certified to the Office of the State Comptroller and the issuing officer or agency.

I hereby agree to the above terms and conditions:

Signature of Traveler_____
Date_____
Signature of Supervisor_____
Date**A/P USE ONLY**

Voucher # _____ Payment Date _____

Signature _____