

REQUEST FOR ADVANCE

DATE: \_\_\_\_\_ REQUESTED BY: \_\_\_\_\_  
Amount \_\_\_\_\_  
Address: \_\_\_\_\_  
Dept.No. \_\_\_\_\_ Approved by: Reason: \_\_\_\_\_  
Amount approved \_\_\_\_\_ Check No. \_\_\_\_\_  
Received by \_\_\_\_\_

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