

# INSTRUCTIONS

## Cash Advance

### Cash Advance Acknowledgement

This form is to be filled out by the Payee or person receiving payment.

Forms can be obtained from the Foundation (F.G. Clark Administration Bldg, 3<sup>rd</sup> Floor)

<b>Item on Report</b>	<b>Description</b>
PAYEE NAME & ADDRESS	Name and Address of person/company receiving advance payment
Account Name	Name of the fund being charged
<b>Cash Advance</b>	Mark this line to indicate Cash Advance.
Total Cost	Enter the amount of the cash advance payment
Description/Purpose for Acknowledgement	Describe the purpose/reason for the promissory
Total Cost	Enter the amount of the loan
<b>Acknowledgement</b>	Mark this line to indicate Acknowledgement agreement.  * Note: Requires Co-Signer
Description/Purpose for Acknowledgement	Describe the purpose/reason for the acknowledgement
Total Cost	Enter the amount of the acknowledgment
Signature	Signature of person receiving payment for scholarship or service
Co-Signer (Faculty or Staff Member)	Signature of the secondary party responsible for receiving payment * Must be Faculty or Staff Member



# Southern University System Foundation

3<sup>rd</sup> Floor, J.S. Clark Administration Building

Post Office Box 2468

Baton Rouge, Louisiana 70821-2468

Phone #: (225) 771-3911

Fax #: (225) 771-3242

## CASH ADVANCE ACKNOWLEDGEMENT

Please complete form W9.

DATE:		ACCOUNT NAME:	
PAYEE NAME & ADDRESS:		VENDOR ID#/SOCIAL SECURITY #:	
ACKNOWLEDGEMENT	DESCRIPTION/PURPOSE FOR ACKNOWLEDGEMENT	TOTAL COST	
CASH ADVANCE_____		\$	
<p>I certify that the accompanying disbursement request the amount above is for an advance prior to purchase or travel. I understand the Foundation's policy: that all monies spent must be receipted and that the Foundation does pay per diem or actual cost. <b>I agree to provide the Foundation with receipts for all reasonable expenditures, for which the advance is being made, within (10) ten days of the expenditure or completion of travel. I also promise to reimburse the Foundation for any portion of this advance which is not properly receipted. A form 1099 will be issued for IRS tax reporting purposes if adequate receipts and documentation is not submitted within the provided time frame.</b></p>			
ACKNOWLEDGEMENT_____		\$	
<p>I certify that the accompanying disbursement request for the above amount to be received is for the reason and purpose stated. If this disbursement is for scholarship, I certify that I am currently enrolled at Southern University and A&amp;M College. If this disbursement is for payment of service, I certify that I am not a full time employee of the State of Louisiana.</p>			
<b>SIGNATURE APPROVAL</b>			

I hereby certify or affirm the following: The above expenses are (were) actually incurred in accordance with the documented purpose of the fund being charged and serve to benefit an authorized program of Southern University & A&M College System. None of the above expenses have been paid by any other funding sources. If any of the above expenses are reimbursed by any other funding source, the reimbursement will be immediately forwarded to the Southern University System Foundation for credit to the fund charged herein.

Authorized Account Administrator or Requestor \_\_\_\_\_ Date \_\_\_\_\_

Authorized Dean [ ] Director [ ] \_\_\_\_\_ Date \_\_\_\_\_

Chancellor [ ] \_\_\_\_\_ Date \_\_\_\_\_

President [ ] \_\_\_\_\_ Date \_\_\_\_\_

Foundation Approval:

Foundation Officer [ ] Business Manager [ ] \_\_\_\_\_ Date \_\_\_\_\_

Foundation Use Only

	Account #	Project #	Amount
Check #:			
Check Date:			
Received by:			
TOTAL:			\$
Bank Name:	ADVANCE/LOAN	( )	Date Repaid: