

ACCOUNTING CASH ADVANCE AGREEMENT

University of Rhode Island Cash Advance Agreement

Name: _____

Date: _____

Amount: _____

Purpose: _____

I understand I must obtain receipts for all disbursements made against the cash advance to me in the above amount and received on _____.

I also understand I am responsible for ensuring receipts are returned to the University's General Accounting Office upon completion of the project.

In accordance with this memorandum, I am responsible for returning any unexpended funds to the Accounting Office when the project is complete.

By signing this memo, you have agreed to the above procedures with regards to clearing the cash advance.

If you have any questions, please contact [Kristen Scott](#) at (401) 874-4423.