

# Cash Advance Request for Payments to Research Participants \*

College:

1 Cash Advance Requestor:

2 Funding Chartfield String:

3 Principal Investigator:

4 Project Title:

5 Funding Agency/Sponsor:

6 Summary of activity requiring cash advance:

7 Number of anticipated research sessions:

8 Number of anticipated Participants per session:

Total # of anticipated  
research Participants:

9 Anticipated payment amount, per Participant:

Total \$ in anticipated  
Participant payments:

10 Additional amount requested (Provide Explanation):

11 Additional Amount Explanation:

**TOTAL Cash Advance Requested:**

12 Method of Payment Distribution:

13 Process for Payment Reconciliation:

14 Cash Advance Requestor \_\_\_\_\_ Date: \_\_\_\_\_

By signing this, I understand that I am responsible for obtaining receipts for all disbursements made against this cash advance. Additionally, I am responsible for ensuring such receipts and any unexpended funds are returned to the University's Accounting Office on a timely basis.

15 Principal Investigator \_\_\_\_\_

16 Fiscal Contact \_\_\_\_\_

17 College Dean's Office \_\_\_\_\_

\* To be attached to Invoice Voucher when requesting

College of Arts and Sciences

College of Business

Alan Shawn Feinstein College of Education and Professional Studies

College of Engineering

College of the Environment and Life Sciences

College of Health Sciences

College of Nursing

College of Pharmacy

Graduate School of Oceanography

University College for Academic Success