

# Jacksonville State University

## Advanced Funds Voucher

Team: \_\_\_\_\_

Account No: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Trip Dates: \_\_\_\_\_ to \_\_\_\_\_

Destination: \_\_\_\_\_

Funds Advanced: \_\_\_\_\_

**Expenditures**

**Meals** (Attach Meal List):

From-To	Amount	Date	Amount	Date	Amount
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Total Meals: \$ \_\_\_\_\_

**Per Diem** (Attach Petty Cash List)

From-To	Amount x	# of students	x	# of days	=	\$
_____	_____	X	_____	X	_____	_____
_____	_____	X	_____	X	_____	_____
_____	_____	X	_____	X	_____	_____

Total Cash Provided: \$ \_\_\_\_\_

**Rooms** (Attach Rooming List):

From-To	Amt per room	x # of rooms	x # of nights	=	\$
_____	_____	X	_____	X	_____
_____	_____	X	_____	X	_____
_____	_____	X	_____	X	_____
_____	_____	X	_____	X	_____

Total Rooms: \$ \_\_\_\_\_

**Other** (Itemize and Attach Original Receipt):

Date	Description	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Total Other: \$ \_\_\_\_\_

**Total Expenditures**

\$ \_\_\_\_\_

**Funds Returned**

\$ \_\_\_\_\_

I certify that only student(s) expenditures were paid from this Petty Cash advance and that according to the documentation and to the best of my knowledge, this is in compliance with all regulations and policies. I understand that I must pay back any funds not properly administered.

Received by/date: \_\_\_\_\_  
Signature Date

Reviewed by/date: \_\_\_\_\_  
Accounts Payable Date

Checked in by: \_\_\_\_\_  
Cashier Date

\_\_\_\_\_ Date  
 Disbursements Manager