

Accounts Payable Clerk

## **Advance Reconciliation Form**

<b>Accounting Dept Use</b>						
Advance Log						
Reroute for Completion						
Returned to Accounting						

Instructions: University Policy requires that this form, including any receipts or supporting documentation, be turned in to Accounts Payable within two weeks after event has occurred; otherwise the advance will be charged to your 10-10 Account.

Department  Department Num	nber:				
•					
Payee Information					
	o:	_	NU ID Number:		
Classification:	NU Employee	O NU Student	От	his is a new address.	
Address	Address		City	State Zip Code	
Advance Informat	tion				
Date Advance Re	eceived:	Amo	ount of Advance:		
Itemized Expense	es				
	Business Purpose (Use Neg	gative Amounts)		Amount	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
	Amoun	t Due University / (/	Amount Owed to Payee)	: \$	
Required Signatur	ıres				
Person Responsible for the Advance Amoun				unt Due University?	
Any amount due the U  Cashier prior to sendin			University must be paid to the ling this form to Accounting, other supporting documents	;; attac	