## CITY OF HAMILTON REQUEST FOR TRAVEL ADVANCE

Applicant		Date		
Department		Accoun	t #	
Telephone	Travel Dates:	From	То	
I,	, am rec	questing approv	al for a travel advance in the amo	ount
of \$				
Signature of Applicant		Date		
Approval Recommended Departme		Date		
	RECEIPT OF ADVANCE ACKNOWLEDGEMENT			
Check #	Date		Issued By	
I,	, an e	employee of the	City of Hamilton, acknowledge th	nat
I have applied for and received from the				
to be used for the payment of expenses City of Hamilton.	in connection with officia	l travel to be per	formed by me as authorized by t	he
I agree that this amount is to be repaid to otherwise be paid me, pursuant to the al is intended to be an assignment by me o	bove authorization upon	my return from t	his trip, and the execution of this	
I also agree that my reimbursement clair (30) working days after completion of th		rred will be filed	with the Finance Office within th	iirty
In consideration of the receipt by me of t fail to file a reimbursement claim and sho do not expend all of said advance for off events, the City of Hamilton may reimbu check(s), or from other amounts which m	ow the expenditures there icial travel on behalf of th rse itself by withholding a	eon which l actu e City of Hamiltc an equivalent am	ally incurred and/or (2) in the even on authorized then in either of the nount from my subsequent payro	ent l ese
	ADVANCE RECON	NCILIATION		
Date Expense Account Received & Ver	ified			
Total Expenses \$				
Amount Due Employee by P.O. Requis	ition			

Amount of Advance Returned to City\_\_\_\_\_

\_\_\_\_\_

Processed by