**UPLB FOUNDATION, INC.**

A.Aglibut Ave. (formerly Lanzones St.)

UPLB Campus, College, Laguna

Web: www.uplbfi.org

 E-mail: uplbfoundation@uplbfi.org

 Tel./ Fax No.: (049) 536-3688

**CASH ADVANCE REQUEST**

Requisitioner : \_\_\_\_\_\_\_ Date :

Position : Tel. No:

Dept/College :

Fund Source :

EXPENSE ITEMS AMOUNT

 Supplies P

 Travel

 Others (Please specify)

` TOTAL P

I hereby promise to liquidate this cash advance not later than \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

If I fail to do so I am hereby authorizing UPLB and UPLBFI to withhold my salary/honorarium and other remuneration due me.

 PRINTED NAME AND SIGNATURE

|  |  |  |
| --- | --- | --- |
| **NOTED BY:** |  |  |
|  |  |  |
| PROJECT LEADER |  | UNIT DIRECTOR |
|  |  |  |
|  |  |  |
| COLLEGE DEAN |  | **APPROVED BY:** |
|  |  |  |
|  |  | **DR. ENRICO P. SUPANGCO** |
|  |  | Executive Director |

CASH ADVANCE ACCOUNTABILITY Outstanding  ~~P~~ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Breakdown

 Project Title

1.

2.

3. TOTAL ~~P~~  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Conditions/Sanctions on Cash** **Advance**

* A Special Power of Attorney (SPA) is required for cash advance exceeding Thirty Thousand Pesos (P30,000.00).
* In the event that the requisitioner cannot liquidate on time, any compensation due him/her equivalent to the unsettled cash advance shall be withheld.
* An interest of 5% per annum on the unliquidated cash advance will be assessed starting the date of the expiration of cash advance, without prejudice to filing civil case in court after ignoring at least one (1) letter reminding settlement of obligation.

Conforme:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature over Printed Name