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| **Funds in Advance** |
| **Claim Details** |  |
| Name of claimant |  |
| Staff/payroll number |  |
| Institution/department |  |
| Funds requested |  |
| Currency |  |
| Reason for the advance (if a trip please include the dates) |  |
| Date required by |  |
|  |  |
| **To be paid via (choose 1)** |  |
| Salary (primary method) |[ ]
| BACS (only if salary is unsuitable) |[ ]
|  |  |
| **Certified by Budget Holder** |  |
| Budget holder’s Name |  |
| Budget holder’s Signature |  |
| Date signed |  |
|  |  |
| **Conditions of the Advance** |  |
| The purpose of this advance is to provide cash flow in exceptional circumstances for larger work related expenses, **it is not an expense claim.** A separate expense claim will need to be entered onto aCloud.**Terms**By signing this form, you (the claimant) agree to:* Receive the above advance by the above date.
* Have the **full value** of the advance **deducted** from your salary in the next payroll two months after you have received the advance or once you have claimed the related expenses (whichever is earlier). This will have a nil effect so long as you have claimed your expenses.
* Fill out an expenses claim on aCloud for the expenses incurred in line with the University’s expense policy.
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| Claimant name |  |
| Claimant signature |  |
| Date Signed |  |