



VASHON ISLAND SCHOOL DISTRICT #402
Request for Cash Advance/Per Diem

NAME OF EMPLOYEE: \_\_\_\_\_ DATE: \_\_\_\_\_

TOTAL AMOUNT REQUESTED: \$ \_\_\_\_\_

PURPOSE: \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

IF TRAVELING (please attach completed Travel Request Form):

PER DIEM: YES NO TOTAL PER DIEM REQUESTED: \$ \_\_\_\_\_

DEPARTURE DATE: \_\_\_\_\_

RETURN DATE: \_\_\_\_\_

EXPENDITURE CODE: \_\_\_\_\_

APPROVALS: \_\_\_\_\_ Date
Supervisor
\_\_\_\_\_ Date
Executive Director of Business & Operations
OR
\_\_\_\_\_ Date
Superintendent

I acknowledge receipt of the amount indicated above. I agree to submit a record of expenses in order to settle this cash advance within fifteen (15) days following the end of the event/activity or prior to the last day of school. All cash not returned to the District must be accounted for by attaching original receipts (except for mileage and per diem expenses) or District supplied forms specific to the expense.
I also agree that all unsettled cash advances may be withheld from my last payroll warrant (check); any default in according for or repaying an advance shall render the full amount which is unpaid immediately due and payable with interest at the rate of 10% per annum from the date of default until repaid. (RCW 42.24.090)

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_