



Student Fund Accounting Office
Rutgers, The State University of New Jersey
326 Penn Street, Room 309
Camden, NJ 08102-1412

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Phone: 856-225-2662
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CASH ADVANCE AGREEMENT

Date of Agreement: _____

I have received check # _____ in the amount of \$ _____ in
order to pay for miscellaneous expenses associated with the _____
program sponsored by the _____ student organization and/or department.

I understand that I am personally responsible for **returning the completed advance reconciliation form, all original and itemized receipts** and **all unused funds** associated with this transaction **within 30 days** of the date listed above.

All expenses above the advanced amount must be within budget and have the approval of the student organization President and/or Treasurer.

Failure to provide all receipts and unused funds will result in the loss of student fund privileges and/or financial hold on your personal academic records.

Name (Print): _____ Student Org: _____

Signature _____ Date: _____