<u>UNUS</u>	ED CASH ADVANCE REPAYMENT RECEIPT
Received from:	
Name:	Employee ID:
Cash Advance Nam	e (or Key):
Amount: \$	Paid by: ☐ Cash (Do NOT send cash by inter-office mail)
	□ Cheque #
	☐ Money Order
Signature:	Date:
Received by: Fina	This section for Financial Services use only
Name:	
Position:	
Signature:	Date:

If sending by mail, please include your email so we can send you a copy to attach to your claim

NOTE: Please scan and attach to your expense report after it has been signed by Financial Services. For detailed instructions on how to do this, please refer to guidance document titled: Cash Advance, Returning Unused Amounts.