

TRAVEL ADVANCE AGREEMENT

Name:

TA#:

Check Amount:

Return Date:

Check #:

Check Date:

In consideration of the receipt of the attached Central Connecticut State University check representing an advance for travel expenses, I agree that these are State of Connecticut funds, and I understand that I am personally responsible for them whether or not my employment continues with the State of Connecticut, and whether the funds are lost or stolen. I agree to notify both the CCSU Police and CCSU Travel Office **immediately** should a loss, theft, or mysterious disappearance of funds occur.

I will submit the required documentation for reimbursement, including supporting receipts, to the Travel Office **within fifteen (15) business days after return**; and if the cash advance was more than the expenditure, I will return the excess funds along with the completed documentation. I understand that if I do not adhere to these time frames for paperwork completion or repayment, I may be denied future travel advances, **or the repayment of my cash advance may be deducted from my pay check**. Additionally, any failure on my part to file the required documentation or repay excess funds by the due date will subject me to reasonable costs of collection including but not limited to attorney fees and Court costs if required to enforce this agreement.

If the cash advance was **MORE THAN** the total expenditure, I will return the excess to the Travel Office **within fifteen (15) business days** of my return. The travel advance receivables account will be credited appropriately by the Travel Office.

If the cash advance was **LESS THAN** the total approved expenditure, the travel advance receivables account will be credited appropriately by the Travel Office and a check will be provided to me for the reimbursement due.

Signature

Date