

# State of South Carolina Comptroller General's Office

## Request for Official Travel Cash Advance

E240

Agency Number

Name: \_\_\_\_\_  
Last
First
MI

ZEMP #: \_\_\_\_\_

Official Headquarters: \_\_\_\_\_

Comptroller General Office approval needed for travel advances within the state.

Approved: \_\_\_\_\_

Computation of Travel Advance:

	<u>Dates</u>	<u>Times</u>
Destination From: _____	_____	_____
To: _____	_____	_____
Return From: _____	_____	_____
To: _____	_____	_____
Purpose of Trip: _____		
# Meals: _____ X Days @ _____ Per Day = _____		
# Nights Lodging: _____ X Days @ _____ Per Day = _____		
Other: _____ X Days @ _____ Per Day = _____		
(No Airlines)	Subtotal _____	X 80% = _____

Approved By:

\_\_\_\_\_  
 (Signature of Department Head)

\_\_\_\_\_  
 Date

Request for cash in the amount shown above is acknowledged. All Travel Advance must be at least \$250.00

\_\_\_\_\_  
 (Signature of Traveler)

\_\_\_\_\_  
 Date