

GEORGIA STATE UNIVERISTY
PROJECT ADVANCE and IMPREST FUND REQUEST FORM
(sponsored and non-sponsored projects)

CHECK ONE: Project Advance Fund Imprest Fund
School/Department/Unit: _____ Date: _____

SECTION ONE: ESTABLISH A FUND

Custodian: _____ Panther ID : _____

Purpose of Fund (should include a reason why the fund is needed) : _____

If using Human Participants, IRB approval is required. Using Human Participants IRB approval/Informed Consent attached

Requested Amount of Fund: _____ Funding Source Speedtype: _____

Funding Source Budget End Date: _____ (Fund must be closed prior to this date)

Fund Closure Date: _____ (if using Fund code 10xxx, fund must be closed by last business day of June)

Project requires anonymity of subjects: No___ YES___ (if yes, attach memo explaining reason for anonymity)

Type of Storage for Cash (Metal Lock Box, Vault, Bank, etc.): _____

Location of Funds (eg. Building): _____ Room: _____

SECTION TWO: FUNDS AGREEMENT

I, _____, as Custodian for the above referenced Project Advance/ Imprest Fund, hereby acknowledge request of funds to be advanced in the amount of \$_____. I understand and agree that these funds may only be used for the expenses related to this account as described above. I further acknowledge and agree that all uses of these funds must be properly documented with original receipts and/logs which document its proper use. I have read and understand the Project Advance Imprest Fund Procedures and understand that I am responsible for ensuring that the budget of the project from which these funds are drawn is adequate to cover all funds drawn down. I agree to account for all funds and close out this Project Advance Fund within 30 THIRTY DAYS or this Imprest Fund by the Fund Closure Date listed above. I understand that I am personally responsible for the proper safekeeping and use of said funds, and that I may be held personally liable for unauthorized expenditures, shortages and losses resulting from negligent management of the funds. Further, I understand that improper use of funds could result in disciplinary action, up to and including termination.

(Custodian Signature)

(Title)

(Date)

SECTION THREE: ADMINISTRATIVE APPROVAL

I approve the designation of _____ as the custodian of the above stated Project Advance/Imprest Fund.

Approved By: _____ Date: _____
(PI/PD or Unit Head Printed) (Signature)

SECTION FOUR: SPONSORED PROPOSALS & AWARDS (sponsored) or UNIVERSITY INITIATIVES (internal grants) APPROVAL

Approved By: _____ Date: _____
(Assoc. Director, Sponsored Proposals & Awards or Assoc. Director, Special Research Initiatives)

SECTION FIVE: OFFICE OF ACCOUNTING SERVICES APPROVAL

Approved By: _____ Date: _____
(Office of Accounting Services)