THE UNIVERSITY OF MEMPHIS®

Supply Advance Reconciliation

Return to: Accounting, Admin Rm. 275

Todays Date:

Requestor Information:

Name:

Oracle Employee Number:

Telephone Number:

COA: (entity-fund-org-acct-prog-act-init-0000)

Department:

Advance Amount: $ -

Returned to Bursar: $ -

Reconciliation Amount: $ -

Advance Balance (Due to Requestor): $ -

IRB# (if research)

Reconciliation Transactions - Please ensure that all detailed documentation is attached.

Date	Vendor	Amount	Description/Purpose
**Continued from Multiple Pages			
Total		$ -	

***Use additional spreadsheets if necessary.*

Signature of Requestor **Date**

Signature of Approver **Date**

Accounting Office Use Only

Date Processed _____ SA# _____

Initials _____ Doc# _____

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