

**Williams College - Controller's Office**  
**Travel/Cash Advance Request and Reconciliation Form**  
**\*\*\*All Outstanding Advances must be cleared before a new advance is issued\*\*\***

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**Vendor Legal Name:**

**Date Leaving on Trip:**

**Special Handling (Pickup):**

**Date Returning from Trip:**

**Address: (required for all Vendors)**

**Destination of Trip and/or Purpose of Advance**

PS Account (6)	Fund (3)	Dept. ID (7)	Proj/Grnt (6)	Amount (insert a decimal)
135200				

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**\*\*\*\*Use area below for Cash Advance Reconciliation\*\*\*\***  
**If clearing a travel advance, use the Travel Reimbursement Form**

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PS Account (6)	Fund (3)	Dept ID (7)	Project/Grant (6)	Amount (insert a decimal)

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**Vendor Classification: (Please check below)**

Wms. Employee    Wms. Student    Other:

**Prepared by:** \_\_\_\_\_

**Authorized by:** \_\_\_\_\_

Total Expenses:

Less Funds Advanced:

Amount Due You:

Amount Due College: