UNIVERSITY OF PRETORIA

SETTLEMENT OF ADVANCE

TRANSACTION NUMBER
339548

PLEASE NOTE: 1.

- Original documentation must be attached.
- The form must be approved by the Dean/Director/Department
- 3. Air travel: Attach boarding passes and copies of the air ticket. A copy of passport entries may be requested.
- 4. In calculating the daily allowance the duration of the journey is counted from the date of arrival in the foreign country to the date of departure.
- 5. Incomplete forms will be returned to the advance holder.

NAME OF ADVANCE HOLDER:	JGU van Wvk	Personnel number 2617080

Type of Travel	Departure Date	Return Date 6/4/11		Number of days			Official use	
Air	22/3/11			7	7			
EXPENSES* (please in calculations where ne	nclude worksheet with cessary)		R	С	Cost Centre	Account no.	Project no.	Office
Daily subsistence allowa	ance							
Travel expenses (Km cl	aimed)							
Travel expenses other F	Flights							
Other (specify)								
Total of Expenses					_			
Settlement of Advance	ə:							
TOTAL ADVANCE			12 785	Original amount granted				

TOTAL ADVANCE	12 785	00	Original amount granted	
Less Expenses			As above	
Receipt number () (if there is a shortfall)			Cost Centre	Acc no. 5660
Due by (+) or to (-) Advance Holder			If money is due to an Advance holder separate claim form A50/01 must be submitted for this amount by holder with the settlement of Advance form.	

I hereby confirm that:

- Expenses that I have claimed here, have not previously been paid to me;
- Expenses that I have claimed here, have not been paid directly by the University to supplier/provider;
- 3.
- Expenses were incurred and were unavoidable; The amounts claimed are in proportion with the official tariff structure;
- Prior approval was obtained from my line manager for the above business travel; and
- The claim was drawn up in accordance with the relevant regulations, policy and procedures.

Signature (advance holder):	Approved: (Dean / Director	/ Head of Department)
Name (please print):	Name (please print):	
Date:	Date:	

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Please submit this form to your Faculty or Support Service's Accountant in the Department of Finance

Remarks:

FACULTY ACCOUNTANT: SIGNATURE DATE **BUDGET CONTROL: SIGNATURE** DATE