

**THE SOCIETY OF CREATIVE ANACHRONISM, INC
KINGDOM OF ATENVELDT
CASH ADVANCE REQUEST & RECONCILIATION FORM**

Branch: _____
 Requestor _____
 Name: _____
 Street _____
 Address: _____

 City: _____ State/Province: _____ Zip: _____
 Telephone: _____ Home: _____ Work: _____
 SCA Name: _____

EXPENSES	Offices & Admin	Event Related	Fund Raising	ESTIMATED TOTAL	ACTUAL TOTAL
1 Advertising					
2 Equipment Rental & Maintenance					
3 Fees & Honoria (explain below)					
4 Food					
5 General Supplies					
6 Insurance (NON-SCA)					
7 Occupancy & Site Charges					
8 Postage, Shipping, PO Box Fees					
9 Printing & Publication					
10 Telephone					
11 Travel (Gas, tolls, airfare.)					
12 Other Expenses (itemize on back)					
13 TOTAL EXPENSES (LINES 1 TO 12)					
14 Cash Advance					
15 Amount Owed SCA / (Amount owed Requestor)	SUBTRACT 14 FROM 13 FOR TOTAL				
O&A, ER, FR	FEES, Honoraria, and Other Expenses: Paid to:		Reason	Actual Amount	
TOTAL					

Cash advances must be reconciled and/or returned to the exchequer within 30 days after the event is held.

Attach cost estimation documentation to this form. When reconciling to receipts, attach receipts to this form or tape to 8 1/2 x 11 piece of paper and scan. Circle the amount to be paid on each receipt. Payments may be withheld until proper receipts are submitted. Receipts must be legible.

Approved by: _____ Date: _____

FOR THE EXCHEQUER'S USE ONLY

Date Rcvd: _____ CK No.: _____ AMT: _____ Date Reconciled: _____
 Mar-11 P-237