Arvind Fashions Limited

**Du Parc Trinity, 8th Floor, 17, M.G. Road, Bangalore - 560 001**

ADVANCE REQUISITION FORM

1. Name of the Drawee:.........................................................................................................Emp. Code:..................................

2. Amount Required : Rs..................................... Emp. Mobile No. :.............................................................

(Rupees......................................................................................................................................

..................................................................................................................................

3. Purpose of Advance : ............................................................................................................................................................

4. Approx Date by which advance will be settled : .................................................................................................................

(Specify reasons if beyond 48 hours)

|  |  |  |  |
| --- | --- | --- | --- |
| SIGNATURE OF THE DRAWEE PAYEE | SANCTIONING AUTHORITY | PASSED BY | PAID BY |
|  |  |  |  |

NOTE : 1. All advances must be approved the Departmental Heads and countersigned by the Finance manager.

FOR ACCOUNTS USE SETTLEMENT DETAILS

**VCHR No/DATE**.......................................... **AMOUNT REFUND**

**PAID Rs**.......................................................

1. All advances must be settled within 48 days.
2. If the amount is not utillised for the purpose it is drawn, the same must be returned to the Cashier forthwith.
3. Please submit all expenses against this advance in the expenses claim statement, with all bills, duly signed by the Sanctioning Authority.