



COMSATS Institute of Information Technology
Defence Road, Off Raiwind Road, Lahore

Advance Request Form

Sr. # _____

Date:/...../.....

I, Designation:

Department: Request an advance amounting to Rs.

(In words):

On account/purpose of

Submitted by:

Recommended by:

Name:

Name:

Date:

Date:

Signature:

Signature:

Internal Audit Section

Checked By : _____

Signature: _____

Approved by:

Name:

Designation:

Signature