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## ADVANCE REQUEST FORM (ARF)

This form must be used to submit a request for an advance of funds to be spent on approved work for CISV International. Please send the signed ARF (plus an invoice, quote or other proof of costs) to the International Office (IO). The ARF and proof of costs can be sent by post, fax or by scanned and then sent by e-mail. IO staff will check the documentation and request any additional information where necessary. If figures are correct, the ARF is sent by IO to the appropriate EEC/IEC member for approval. Once the appropriate person signs the ARF for approval, they send it back to the IO and the IO will process the payment.

Please note that: No payment will be made without proof of costs or explanation of expenses. Once the expenditure has been made, an Expenditure Request Form (ERF) and original receipts must be sent to the IO. The person who requested the advance is responsible for the return of any unused advanced funds.

### Part 1. Name and Amount Requested

Name of person requesting advance of funds
Purpose of expense (specify meetings / workshops / project or publication as appropriate)
Budget to be charged (name of committee or other budget line)

BUDGET REFERENCE	EXPENSE / ITEM	CODE (IO only)	AMOUNT CURRENCY	STERLING (IO only)
<b>Administration</b>				
Post				
Phone/Fax/E-mail				
Other				
<b>AIM</b>				
Travel				
Accommodation				
<b>Other Meeting</b>				
Travel				
Accommodation / Insurance				
Registration / Fees				
<b>Publications</b>				
<b>Projects</b>				
<b>Seminar Staff</b>				
Travel				
Insurance				
Is this expense covered by a grant? (e.g. Peace Fund) If yes, which grant and how much in GBP is covered?				

<b>Total Amount Requested</b>		<b>Currency</b>	
<b>Sterling Total £ (to be completed by IO staff)</b>			

## Part 2. Type of Payment Requested and Details

Amounts under £100 will only be paid by OCN. This will save bank charges at your end. For Cash Flow purposes Offset payment will be actioned unless your NA is in credit, then another method will be authorized.

Payment requested by which method (please put an "x" in the appropriate box in the first column)	
<input type="checkbox"/>	Offset credit via National Association
<input type="checkbox"/>	Electronic bank transfer (details below)
<input type="checkbox"/>	Cheque
<input type="checkbox"/>	Cash

Contact Details of Person Requesting Advance Payment			
Given Name then Surname			
Number & Street			
Town / City, then State/ Province			
Country		Postcode / Zip code	
	Country Code	Area Code	Local Number
Tel			
Fax			
E mail			

Bank details if requesting payment by Electronic Transfer	
Bank Account Held In The Name Of	
Bank	
Branch Name	
Branch Address	
Bank / Branch Sort Code	
Bank Account Number	

## Part 3. Signatures Required for Payment

Signature of person requesting reimbursement		(Day / Month / Year)

Signature of Chair / Budget-holder		(Day / Month / Year)

Signature of Secretary General / Fiscal Officer		(Day / Month / Year)

Signature of President / IEC Liaison (as required)		(Day / Month / Year)

## Part 4. Process

This section to be completed by IO Staff ONLY			
ARF Ref #		Date Received	
Budget Code		Has proof of cost been checked?	