



# REQUEST FOR ADVANCE AND PROMISSORY NOTE

\_\_\_\_\_  
Name DOC number Date

I hereby request the Department to grant an advance without interest in the amount of \$ \_\_\_\_\_ from the Community Services Revolving Fund (CSRF). The following financial information is supplied for establishing my eligibility for the advance:

- A. Outstanding CSRF debts \$ \_\_\_\_\_
- B. Amount of request \$ \_\_\_\_\_
- C. Total debts to CSRF \$ \_\_\_\_\_

I understand that if the advance is approved, the proceeds will be deposited into my trust account and disbursed per RCW 72.65.090. If the Department grants my request, I promise to pay the amount of the advance secured by this note. I grant the right to the Department to make payments on this note from my trust account.

I certify that the above information is true and complete and submitted for the purpose of obtaining an advance from the CSRF.

\_\_\_\_\_  
Signature Date

### CASE MANAGER RECOMMENDATION

This individual will be housed at a Reentry Center until \_\_\_\_\_.

I have reviewed this application and recommend this request be:  Approved  Denied

Reason for denial: \_\_\_\_\_

\_\_\_\_\_  
Name Signature Date

### DECISION

Approved  Denied

\_\_\_\_\_  
Name Signature Date

Approval is required by the Reentry Center Administrator if line "C" is more than \$300.00.

Approved  Denied

\_\_\_\_\_  
Reentry Center Administrator Signature Date

### BUSINESS OFFICE USE ONLY

Date issued: \_\_\_\_\_ Check number: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

The contents of this document may be eligible for public disclosure. Social Security Numbers are considered confidential information and will be redacted in the event of such a request. This form is governed by Executive Order 16-01, RCW 42.56, and RCW 40.14.

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