



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 Work/Training Release 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 Work Release Administrator if line "C" is more than \$300.00.
 Approved Denied

Work Release 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.

Distribution: **WHITE** - Business office **CANARY** - Work/Training Release facility **PINK** - Incarcerated individual