## **CHECK REQUEST INSTRUCTIONS**

#### **Purpose:**

The primary purpose of a Check Request is to reimburse employees for personal funds that have already been expended to conduct university business. Check Requests can also be used when other forms of payment are not appropriate. However this is the exception, not the rule.

### When to use:

- To process reimbursements for employees.
- To process refund requests for miscellaneous deposits.
- By Grants Accounting to return unused funds to granting agencies.
- For payments using balance sheet accounts (only specific departments).

#### When NOT to use:

- To pay vendors.
- When a PCard has been used for payment.
- When contracting services from non-university employees.
- To pay an employee for performing supplemental duties.
- For travel advances or reimbursements.

#### How to complete the form:

NOTE: Use Internet Explorer (IE) for the best experience with this form.

# **TOP**

NOTE: The Check Request number populates automatically each time the document is opened.

**Requested Check Date:** This is the date you would like the check to be printed. Every effort will be made to meet the requested date.

**Payee:** Person to whom the check will be made payable.

NOTE: If more than one person is being paid using the same FOAP, leave the payee field blank and complete the Payees List (page 2 of the Check Request). For more than 25 payees, use the Continuing Payees List (page 3 of the Check Request).

**Payee ID#:** Enter the payee's Banner ID – Y#, if known (preferred). If not known, provide the payee's Social Security # (SSN) or Employer Identification # (EIN).

**Address:** Enter the payee's complete address.

**Purpose of Request:** Describe the nature of the expenditure. Expenditures that qualify for employee reimbursement must have a clear, direct benefit to the university.

### **MIDDLE**

**FOAP to be charged:** The FOAP is the funding source of the request. There can be multiple lines on one Check Request, unless using a list. For a list, there are multiple payees, but there must be only one FOAP.

Fund: Required

*Organization:* Required for revenue and expense. Not necessary for balance sheet accounts.

**Account:** Required. Refer to the link on the Check Request for a list of accounts and descriptions.

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**Program:** Required for revenue and expense. Not necessary for balance sheet accounts.

**Amount:** The dollar amount requested. If the request is to be paid from different funding sources, then break out the amounts that correspond to each FOAP. If all expenses are paid from one FOAP, list the total on that line.

NOTE: Funding should be verified for each FOAP to be charged and any necessary transfers should be made before submitting. Failure to do so may result in delay of reimbursement.

**Total:** Total amount requested, which will be automatically calculated based on the Amount entered on each line.

### **BOTTOM**

#### **Support Documentation is attached:**

Yes: Check this box if support documentation is attached to the check request.

**NO:** Check this box if support documentation is located in another area. This option is used by specific departments for payments, not reimbursements.

NOTE: Receipts are always required for reimbursements. If receipts are not attached, the Check Request will be returned to the submitting department.

*If NO, support documentation is located:* Specify the location by department in the next field. Documentation must be retained for an adequate period of time to meet the record retention guidelines. All documentation is subject to audit.

#### **Check Distribution:**

Mail: Send to the payee's address.

*Include with mailing:* Select this box if documents have been attached. Accounts Payable will not make copies of original retained documentation for mailing purposes; therefore two copies must accompany the request if one is to be mailed.

**Send Inter-office to:** List the name and location of the person on campus that the check will be sent to through inter-office mail.

**Financial Manager's signature:** The financial manager of the FOAP to be charged authorizes the reimbursement by signing. If multiple FOAP's are being charged, the financial manager for each FOAP must sign the Check Request.

NOTE: If the financial manager is the payee, the financial manager's supervisor must sign the form.

Printing Instructions: The Check Request contains 3 pages. Page one is the Check request and pages 2 and 3 are lists that are used for multiple payees using the same FOAP. Print only the pages that are needed.

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