



Faculty Student Association of DOWNSTATE Medical Center

Form #: FSA 001
Form Name: FSA Payment Form
Detail Instructions:

 **Faculty Student Association (FSA)
Payment Form**

Typed Forms Only: Submit completed form to Business Office email to MSC1219 or hand deliver to Student Center, Room 2-08. An advance copy by fax or scan email can initiate processing, but check will not be disbursed until fully signed hard copy is received. Instructions link

DATE Prepared: _____ (Account Type check one) ☐ FSA Direct Operation
☐ FSA Trust and Agency (T&A)
☐ FSA Student Activity Fund (SAF)

ORGANIZATION, DEPT.
or STUDENT COUNCIL NAME: _____

ACCOUNT NUMBER: _____ Account Title/Club Name: _____

TOTAL Check Amount: _____ CHECK PAYABLE TO (Payee Name): _____

☐ 1) Attach Original Invoice(s)
☐ 2) Attach Any/All Receipt(s) for Goods or Services

☐ PICK UP CHECK AT FSA OFFICE or ☐ Mail check to:
Address: _____
City, State, Zip: _____

PURPOSE: Must be a specific and clear description of this payment transaction. Attach any and all applicable supporting documentation, such as letters of explanation/justification, invoices, meeting minutes, contract, etc. Note: Advances, when approved, may be issued with receipts to be submitted. Failure to submit receipts will result in account being frozen.

Authorized Signature: _____ ORGANIZATION Title: _____
Print Name: _____

WHEN JOINT SIGNATURE IS REQUIRED BY ORGANIZATION:

Authorized Signature: _____ ORGANIZATION Title: _____
Print Name: _____

This Section is for FSA OFFICE USE ONLY:

ACCOUNT NUMBER	ACCOUNT TITLE	DEBIT	CREDIT

Check Received By: _____ Date: _____ FSA-001 (5/15)

All FSA Account Holders Use This Form to process Payments and Transfers including FSA Direct Operations, Student Activity Fee (SAF), and Trust and Agency (T&A) Account Holders.

- 1. Date Prepared:** Date form was prepared in format: MM/DD/YYYY
- 2. Account Type:** Check the Box for your Account Type:
FSA Direct Operation=FSA Corp Expenses (Business Office, Bookstore etc.)
SAF= Any account funded in whole or part by a Student Council.
FSA Trust and Agency Accounts= All Accounts that begin the letters TA
- 3. Organization Name:**
 - For Student funded orgs, insert the name of the Student Council that provides the majority of your Club's funding.
 - For