

Office of Development & Philanthropy

Checklist for Payment Request & Voucher: Documents Needed

FOR REFERENCE ONLY: DO NOT SUBMIT WITH PAYMENT REQUESTS & VOUCHERS

HSCB Foundation Payment Request & Voucher Details

	Acco	ount #:	Amount \$:	Date:	
Deimburgemente					
Reimbursements					
	Original itemized receipts specifying item/s for reimbursement.				
	Incomplete credit card receipts may be supported with Credit Card statements showing amount paid, date paid,				
	vendor/purchase, card holder name and partial card number (e.g. last 4) for reimbursement (may redact other information).				
	Do not attach Credit Card statements showing the entire Credit Card Number. Mark through all but the last 4 digits anywhere the earth number is above.				
		anywhere the card number is shown.			
	Flyer or notice of event (for honoraria, events) required for payment or reimbursement				
All receipts need to show the method of payment, and paid in full or zero balance Payments to Vendors for Products or Services or Individuals for Services Rendered					
Original Vendor Invoice with unique invoice # detailing specific, per item costs (for payment to a vendor or individual) made out					
			note, Pro Forma Invoices will n		
			ontracted payments, services, hor		
		payment to an individual for		oraria, events).	
			to independent contractors, hono	verio*	
			-	N – omit W9/IRS 20Questions and note "Not a Citizen" in	
			he Payment Request & Voucher		
				vendors associated with an event.	
				ventos associated with an event. vents, catering, etc. require Downstate Counsel review and	
			approval before official confirma		
		tax is allowed on payments		non or work can begin.	
				20 Overtions forms. In addition, comics of SS# should not	
		r 1118/E118 , wnen neeaea, m cetained.	ay <u>only appear</u> on the w9 or 1ks	20 Questions forms. In addition, copies of SS# should not	
Scholard	Scholarships/Awards				
			Committee Chair to the Signator of	or b) the Signator to the HSCB Foundation that includes: 1)	
				amount/s of award/s, and 5) list of attachments	
		ee member list is required	ser, e) the recipions of mane, e,	, amount of a ward of and of not of accommonly	
		for selection is required			
		gnature sheet is required (per Legal Counsel)			
	Call for applications is <u>strongly recommended</u> , please <u>attach copy</u> ; if a call for applications was not done, an explanation <u>is</u>				
	<u>required</u> (may be included in summary memo) detailing the process for determining the pool of potential candidates.				
	W9 is required with the permanent address (permanent address must be on the Payment Request when recipient is payee).				
			payee is <u>SUNY Downstate</u> (the H		
				pies of SS# should not be retained.	
				SUNY Downstate and the Address is 450 Clarkson Avenue,	
		C 1206, Brooklyn, NY 1120		<u> </u>	
Events, Meetings, Reimbursed Meals, Travel					
		ice of event/agenda is requi			
]	Expense s	sheet is required			
,	Ticket Re	cceipts are required and mus	at show date/time/location of trav	el or corroborating documentation showing	
	date/time/location of travel must be provided				
	Letter/memo of Justification is required				
			neals, refreshments, and meeting	S	
All Paym		est & Vouchers & Genera			
		lly Completed payment rec			
			the Payment Request in the Purp		
			be consistent with the purpose of		
			funds to pay any Purchase Requ		
				is determined by the Account application, and all current	
		natures must be approved b			
			signer, or the signer benefits fr	om the Payment Request, an additional authorized	
		nature is required.		and discoulable and for a complex	
	7. Do	ownstate Employees may r	eceive reimbursement but may	not directly be paid for services rendered.	
Othory)ther:				
Other:					