

**SUNY Downstate Medical Center - Office of Development & Philanthropy**  
**Checklist for Payment Request & Voucher: Documents Needed**

**HSCB Foundation Payment Request & Voucher Details**

Account #: \_\_\_\_\_ Amount \$: \_\_\_\_\_ Date: \_\_\_\_\_

**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 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 to the HSCB Foundation, Inc.
- Letter/memo of Justification (for contracted payments, services, honoraria, events)
- W9 (for payment to an individual for services rendered)\*
- IRS 20 Question form for payments to independent contractors, honoraria\*
  - \* *For honoraria for foreign national speakers without SSN#/TIN – omit W9/IRS 20 Questions and note “Not a Citizen” in the lower right hand corner of the Payment Request & Voucher Purpose Section.*
- Flyer, agenda, other event documentation is required when paying vendors associated with an event.
- All contracts for independent contractors, venues for events, catering, etc. **require Downstate Counsel review and must have HSCB Foundation approval** before official confirmation or work can begin.
  - *No tax is allowed on payments to vendors*
  - *SS#/TIN/EIN, when needed, may only appear on the W9 or IRS 20 Questions forms. In addition, copies of SS# should not be emailed or retained.*

**Scholarships/Awards**

- Summary memo/letter from a) the Committee Chair to the Signator or b) the Signator to the HSCB Foundation that includes: 1) the account name, 2) the account number, 3) the recipient/s’ name/s, 4) amount/s of award/s, and 5) list of attachments
- Committee member list is required
- Criteria for selection is required
- Signature sheet is required
- Call for applications is *strongly recommended*, please attach copy; if a call for applications was not done, **an explanation is required** (may be included in summary memo) detailing the process for determining the pool of potential candidates.
- W9 is required with the **permanent address** (which must also be on the Payment Request & Voucher)
  - *SS#/TIN/EIN may only appear on the W9 form. In addition, copies of SS# should not be emailed or retained.*

**Events, Meetings, Reimbursed Meals, Travel**

- Flyer/notice of event/agenda is required
- Expense sheet is required
- Ticket Receipts are required and must show date/time/location of travel or corroborating documentation showing date/time/location of travel must be provided
- Letter/memo of Justification is required
- An **attendance sheet** is required for meals, refreshments, and meetings

**All Payment Request & Vouchers & General Considerations**

- *Payment must be consistent with the purpose on file for the account*
- *There must be sufficient funds in the account to pay the Purchase Request & Voucher*
- *The Payment Request & Voucher must be signed by the number of current signators required by the account*
- *The Payment Request & Voucher must be filled in completely*
- *The Purpose Section of the Payment Request & Voucher must provide enough detail so a reviewer with no prior knowledge has a clear understanding of the Request.*
- *Downstate Employees may receive reimbursement but may not directly be paid for services rendered*

Other: \_\_\_\_\_