

## HEALTH SCIENCE CENTER HANDBOOK OF OPERATING PROCEDURES

Chapter 6	Fiscal Policies and Procedures	Effective:	July 2000
Section 6.1	Accounting	Revised:	September 2008
<b>Policy 6.1.8</b>	<b>Local/State Voucher</b>	Responsibility:	Assistant Vice President for Business Affairs

### Local/State Voucher

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#### Types of Vouchers

A [Local/State Voucher](#) is the form used to initiate and record payments from all Health Science Center funds. The [Local/State Voucher](#) provides information necessary to meet State statutory requirements.

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#### Voucher Processing

Submit completed [Local/State Vouchers](#) to the Accounting Office for processing. The average time to process a voucher for payment is seven to ten business days.

A voucher may be rushed or expedited for payment if one or more of the following circumstances apply (1) the vendor has a deadline for receipt of payment, (2) a discount is allowed for payments received by specific date, (3) a higher fee is charged for payments not received by a specific date, (4) interest or penalty charges are applied to late payments, or (5) a limited number of spaces are available for conference or seminar.

To rush or expedite a voucher for payment either hand carry directly to Accounting or contact the Customer Services section at 567-6085.

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#### Documentation Required

The following items appear on the [Local/State Voucher](#) (disbursements requiring unique information are discussed in subsequent sections):

1. Voucher Date and Number: A unique number assigned to each voucher processed by the Accounting Office. The date adjacent to the voucher number indicates the date processed.
  2. Pay To: The first line is for the name of the vendor/person to whom the check is payable. The second and following lines are for the remittance address.
  3. Comptroller's Vendor ID/Social Security Number: Vendor's Federal ID number or individual's Social Security Number.
  4. Voucher Total: The amount of the check or warrant.
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5. Department
  6. Contact Person and E-Mail: This identifies the person in the department to contact for questions.
  7. Instructions: Special instructions regarding the payment (*Example: Registration deadline of April 4, 2xxx*).
  8. Account: Expenditure account number assigned by the Accounting Office.
  9. Fund: Source of funds.
  10. Department ID
  11. Project ID
  12. Amount: Amount to charge to the project ID.
  13. Delivery Date: The date items are received or services rendered. This may be a single day or it may identify an interval of dates. This date is important in matching expenditures to appropriate fiscal years, in determining cash discounts, and calculating late payment interest.
  14. Invoice #: Include number if the supporting documentation is a vendor invoice.
  15. Description of Articles or Services
  16. Quantity: Amount ordered or number attending a function.
  17. Recipient's Signature: The recipient's signature is required for (a) patients in a study; (b) individuals being paid for services rendered; and (c) reimbursements.
  18. Witness Signature: A witness signature is required for (a) patients in a study; (b) individuals being paid for services rendered; and (c) whenever the authorized and recipient signature are the same.

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19. Authorized Signature: Requires the signature of a person authorized to sign on the project ID to be charged. The individual with signature authority attests that the requested disbursement is justified and that statements and documentation included with the voucher are correct. Whenever possible, the authorized signature should be someone other than the person to whom the disbursement is made.
20. Accounting Approval: The required signature of person(s) in the Accounting Office authorized to approve voucher payments on behalf of the institution.
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