

The Foundation for Douglas County Schools
PAY VOUCHER

Date: _____

	Employee ID # _____
	Vendor ___ Offsite ___ *Onsite/with students <small>*Special agreements required for these vendors</small>
	Parent and/or Student Refund

Special Handling Instructions:

Payee Name:	
Address:	
City, State, Zip:	

Chapter Name and Description of Expenses: _____ Program ___ Fundraising ___ Administrative

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Account Code and Amount:

Spend Category	\$ Amount	Fund	Cost Center	Budget Source	Program	Initiative
610		77		60		
Total \$						

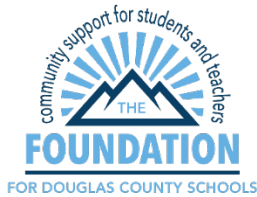
Form is complete with appropriate backup.

The refunds / services listed above are budgeted, appropriated and necessary.

Signature of Preparer & Date

Budget Holder Approval & Date

Authorized Finance Department Official



Checklist for Submitting a Pay Voucher

Pay Voucher Form- Required Information to be Completed:

- Date:** Today's date
- Employee ID:** ID# for DCSD employee (if an employee is being reimbursed)
- Special Handling Instructions:** i.e. check held at the Foundation, sent to the school, mailed to a board member, etc.
- Payee Name & Address=** Name and address of payee (regardless of where the check is being sent)
- Chapter Name & Description:** The name of your chapter and what the expenses are related to
- Signature of Preparer:** Signature of Board Member who reviewed and approved the expense. *Board members cannot sign off on their own pay voucher.
- Account Code:** Chapter account code
 - **Spend Category** = 0610 *may change
 - **Fund** = 77
 - **Cost Center=** Your schools 3 digit location code
 - **Budget Source=** 60
 - **Program=** *3526 for most elementary chapters. Reach out to us if you are not sure of your program code.
 - **Initiative=** most chapters do not have one, but please reach out to us if you unsure.

Additional Required Documentation for Reimbursements

- A legible receipt from a retailer such as Target, Walmart, Hobby Lobby, etc; or
- A legible invoice ONLY IF it shows the method of payment or a balance due of \$0. If it shows a balance due, then it looks like we should be paying the vendor; or
- A legible order Form ONLY IF it shows the method of payment and that the expense was incurred; or
- A copy of the cleared check or a bank statement for the person who incurred the expense.
- Other Considerations:**
 - Receipts should not have personal items on them. Receipts with personal items will NOT have tax reimbursed.
 - Does the total reimbursement request match the total of the receipts? If not include an explanation on the form.
 - Are you attaching more than four receipts? If so, include a summary sheet of the receipts.

Additional Information for Vendor Payments

- Invoice, order form, or contract attached from vendor.
- Does the payee name match the W9/company name? The check will be issued to the name on the W9.
- Are you paying a DCSD employee for services such as coaching, photography, etc? The school bookkeeper needs to pay the employee and the Foundation can transfer the money to the school.
- Has the Foundation paid this vendor before? If not please request a completed and SIGNED W9.
- Is this an item that the school should be purchasing? If so, you should be granting the money to the school, not buying it on their behalf.

Timeline & Other Considerations

- Pay vouchers submitted by Thursday close of business will be reimbursed as follows:
 - The following Tuesday for parent/teacher reimbursements
 - The following Thursday for vendor payments
 - If there is a holiday the payment dates might adjust
- Keep original receipts.
- Teachers are reimbursed via direct deposit.
- Teacher names do not show up as payees on statement; Their names appear on the memo/description line.