



DALHOUSIE UNIVERSITY
HALIFAX, NOVA SCOTIA
CANADA
B3H 4H6

FINANCIAL POLICY AND PROCEDURES		<i>Instruction Number:</i>
<i>Subject:</i> DISBURSEMENTS		<i>Date Issued:</i> April 1, 1993
<i>Title:</i> CHEQUE REQUISITIONS		<i>Date Revised:</i>
<i>Issued by:</i> CONTROLLER	<i>Approved by:</i> DIRECTOR OF FINANCIAL SERVICES	

PURPOSE

This instruction defines the University's Policy and Procedures regarding payment of miscellaneous commitments through the cheque requisitioning process.

DEFINITIONS

Miscellaneous Commitments -

A commitment of funds which is not documented by an invoice from the Payee.
For example: honoraria, advance payments, membership dues, subscription fees, general expense reimbursements, travel expense reimbursement, and under certain conditions, one-time services-rendered payments for non-university employees.

Payee -

Individual or entity to which a cheque is to be made payable.

Group Cheque list -

A large number of like payments (more than 10) due at the same time. One cheque requisition form may be submitted. All pertinent information - payee, forwarding address, employee/student number, account number, amount, and social insurance number if applicable - must be provided on an attached list.

POLICY

1. Payment of a miscellaneous commitment must be requested by completing and submitting the University's "Cheque Requisition" form.
2. In accordance with University policy and Revenue Canada requirements, original receipts, original membership/subscription application forms, or any other pertinent documentation must accompany the cheque requisition.
3. Cheques will be distributed by mail to the Payee within 10 working days from the date that a properly completed and authorized cheque requisition is received in Financial Services.
4. The cheque requisition must be authorized by an individual responsible for the account(s) being charged. When this individual is the payee, the requisition must be authorized by the next highest management level.
5. A group cheque list for more than 50 payees must be prearranged with the Accounts Payable Supervisor at least 15 days before the due date to ensure payment by an agreed upon date.
6. Special payment requirements must be prearranged with the Accounts Payable Supervisor. (e.g. recurring monthly payments)

PROCEDURES

1. The cheque requisition form shall be properly completed and forwarded to Financial Services with all appropriate documentation.

CHEQUE REQUISITION FORM

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Financial Services Use Only

This form is to be used for payments to:
Individuals (i.e. Honorariums, Advances)
Corporations, Societies (When an invoice is **NOT** available)

This form is **NOT TO BE USED** for payments to :
Individuals for student aid, Payments made by Payroll, or
Corporations where invoices ARE available

PLEASE **PRINT** ALL INFORMATION ON FORM, All Claims **MUST** be accompanied by **ORIGINAL RECEIPTS**.
All Fields Marked with an * are required. Incomplete forms may result in delayed processing.

Step 1: Complete ALL mailing and cheque information

Payee*:	Dalhousie ID Number*: B
First Name* Middle* Last Name*	
Phone: W*: _____ H: _____ E-mail: _____	
Permanent Mailing Address*:	Cheque will be mailed to the following address (if different from permanent address i.e. Department)
_____	_____
_____	_____
<input type="checkbox"/> Send Attachment with cheque - PROVIDE ORIGINAL AND COPY TO ACCOMPANY CHEQUE	

Step 2: TYPE OF PAYMENT: One Per Cheque Requisition Please Use Travel Expense Claim Form for Travel Expenses

<input type="checkbox"/> General Reimbursement - Attach all original receipts	<input type="checkbox"/> Membership/Registration - Attach forms
<input type="checkbox"/> Refund	<input type="checkbox"/> Other _____
SIN # (Required for ALL Honorariums, Services Rendered, and Advances) SIN #: _____	
<input type="checkbox"/> Advance - Trip Start Date: _____ End Date: _____ Destination: _____	
<input type="checkbox"/> Honorarium Explanation: _____	
<input type="checkbox"/> Services Rendered	
Date: _____ Rate of Pay (e.g. \$6/hr): _____	Type of Service: _____

VOID

Step 3: Please attach an additional sheet if more space is required.

Fund/Orgn* (5 digits)	Account* (4 Digits)	Net Before GST/HST	GST/HST (Corporations & Dalhousie employees only)	Total	Currency
		\$	+	=	<input type="checkbox"/> CDN
		\$	+	=	<input type="checkbox"/> US
		\$	+	=	<input type="checkbox"/> OTHER
		\$	+	=	_____
TOTAL		\$	\$	\$	

Step 4: Signature of Appropriate Individuals - Refer to Cheque Requisition Policy (www.dal.ca/finserv)

I certify that these expenditures are true and correct, that the whole expenditure is a proper charge against Dalhousie's funds and that the amounts claimed have not previously been, nor will be, claimed or reimbursed to me by Dalhousie or any other organization.

Payee/Claimant Signature _____ Telephone Number: _____
(for Person only)

Department _____ Local Tel: _____ Date: _____

Authorizing Signature _____

Print Name/Title _____

Date Stamp (F/S Use Only)

Financial Services Use Only		Initial	Date
Address Type/Seq: _____	Travel Clerk	_____	_____
FTMDISC Code: _____	Vendor Clerk	_____	_____
	Fund Admin	_____	_____

Please complete and forward copies 1 & 2 to Financial Services. Retain copy 3 for your records