Foundation Helpful Information
All completed Foundation Payment Authorizations and Scholarship forms are to be sent to Denise Matias for review. Forms will be provided to the Dean or his Designee for review and signature.

Approved forms will be hand delivered to Foundation for processing.

Monthly Foundation reports will be emailed to CAH Schools/Departments/Programs.

**General Information**

- Foundation funds must be used for the general benefit of UCF and its specific programs. There are to be no substantial benefits transferred to the donor, faculty, or staff member in return for the financial donation to Foundation. Foundation funds cannot be used for personal items or break room items.

- All disbursement requests must follow Foundation procedures and be submitted on UCF Foundation forms, along with proper documentation and written justification. The Benefit to UCF/Business Purpose needs to be written suitable for auditing purposes. Foundation is a separate entity from UCF and does not have access to PeopleSoft. Forms and procedures are readily available on the CAH website at [http://www.cah.ucf.edu/fs/budget.php](http://www.cah.ucf.edu/fs/budget.php) and are updated as needed.

- Available donations must be posted in the system before payments using those donations will be processed.

- **Signers, including the Chairs, Dean Fernandez, Executive Associate Dean Lyman Brodie and Associate Dean Lynn Hepner, retain the right to not authorize expenses that they have not pre-approved.**

- All payments are subject to review and reimbursements are not guaranteed.

- Reimbursement requests for activities hosting UCF employees only (if an actual working breakfast, lunch, or dinner meal is provided), receipts reflecting meals of $50 or more per person, tips over $25 or 25% or requests over $10,000 must all be approved by the Provost. A tip of 20% is considered standard by Foundation. Per the Dean, a tip over 25% of the meal cost (without tax) will not be approved. Any meal in excess of $50 inclusive of tax and tip (including tax and tip along with meal cost) per attendee will not be approved. Detailed receipts must be provided for meals along with the pay stub.

- Receipts must show payment method, cash or xxxx-xxxx-xxxx-1234 for a credit card. If receipt does not reflect a zero balance, a Proof of Payment/Exception Reimbursement Request Form must be used.

- Per the Dean, flowers purchased or other expenses incurred for a UCF student’s family member who has passed away or who is ill is not a permissible reimbursement through Foundation. Flowers may be purchased and reimbursed through foundation for a UCF employee’s spouse, parent(s), sibling(s) and children only. Please note there is a $90 maximum purchase for flowers with shipping excluded in price.

- Prepaid Expenses are processed only when a deposit is required and only up to 50% of the total estimated bill. This is also normally in agreement with a contract that would have been provided by the vendor. This particular contract would have had to been approved by UCF Legal prior to signature by school/department/program. For questions contact the CAH Dean’s Office Accountant, Denise Matias.
Travel-related reimbursements to the school/department/program, including meals, must have copy of receipts, the itinerary attached, conference agenda, meeting agenda or other sufficient documentation which clearly outlines the dates and description of the purpose for the travel. Also include a copy of the signed completed F&A Travel Reimbursement Voucher (RV). Same paperwork used for UCF Travel F&A for processing.

Scholarships are processed by Foundation and awarded through Student Financial Assistance. Any outstanding fees/fines owed by the student will be deducted from award amount. If the student is not setup through myUCF for direct deposit (Note: this is not the same as DD that is used for Payroll), a paper check will be mailed to the student’s billing address.

The Foundation Payment Authorization (short invoice) and Scholarship forms deadline is Friday to the CAH Dean’s Office Accountant, Denise Matias. The Accountant will obtain the appropriate Dean’s signatures and then have the forms hand delivered to UCF Foundation.

The Foundation cut off is 12 noon on Tuesday, as Foundations goal is to cut a check Friday of the same week. Salary supplements are processed by Foundation and paid through Human Resources.

When deposits are made to Foundation, email a copy of the transmittal to Denise.Matias@ucf.edu for tracking purposes.

Processing Procedures

The Foundation Payment Authorization form is available at: http://www.cah.ucf.edu/fs/budget.php select Financials and then Foundation

Send the Payment Authorization along with the following attachments to Attn: Denise Matias, CAH Dean’s Office, +1990:

☑️ Original detailed invoice or receipt
  ▪ Invoice should show total balance due and be charged to UCF (Foundation is tax exempt for direct payments; please contact Denise Matias if you need a copy of their Foundation’s W-9.)
  ▪ Receipts must show payment information by either reflecting a zero balance or reference a partial credit card number
  ▪ Meal receipt needs to show the detailed information of items purchased along with the payment stub. (This is a CAH policy)
  ▪ Proof of Payment/Exception Reimbursement Request Form should be used for non-zero receipts or cash payments without a receipt (If receipts states “cash” form is not needed)
  ▪ Receipts smaller than 8 ½ x 11 needs to be taped to a piece of paper (Please make sure tape does not cover any information)

☑️ Only if applicable, please include originals of one or more of the following:
  ▪ Agenda, itinerary or flyer with date of event
  ▪ Invitation or announcement of event
  ▪ Attendee list, UCF business affiliation and justification if not affiliated with UCF
  ▪ Certification of Independent Contractor Status form

UCF Foundation Fees

Real estate gifts may incur charges please see the Gift Administrative Fee Policy on Policy IQ (can be accessed from the Foundation’s website at; http://www.ucffoundation.org/public-documents under document library).
0.5625% Quarterly Endowment Fee
Assessed on the market value of your endowment as an overhead fee

Payment Authorization (Short Invoice) Form

- Payments to companies or individuals for services, purchases, and/or entertainment
- Reimbursement to individuals
- Transfer of funds from Foundation to UCF department
- Salary supplement for state employees
- Honorariums for non-state employees; cannot be used for students

General Guidelines for Completing the Payment Authorization Form:

Upper Left hand corner:
- Payee: Complete individual or company name
- Address: Company’s address or home address of individual
- Vendor FEID or SSN (last four numbers ONLY, Required)
- For UCF employees, use Employee ID number (not PID)

Upper Right hand corner:
- Date: Date Short Invoice is being prepared
- Prepared by: Preparer’s name and +4
- Foundation Account Name: i.e., Arts & Humanities Dean’s Account
- Account Number: COAH000xxx

Middle Section:
- Description of Purchase Reimbursement (Who, What, Where, and When): Be clear and use concise statements explaining who, what, where, and when.
  - List receipts separately and, if needed, summarize on an attached page
  - Include a list of attendees noting their affiliation with UCF. For long lists, please type “See attached list of attendees” and then attach the list
  - For a large attendance or list was forgotten please provide an estimated attendance amount
- Benefit to UCF/Business Purpose: Explain how event/purchase benefits UCF (Not the same as description section)
- Total: Sum of all expenditures

Signature Lines
- The first line should be signed by the CAH unit’s Chair/Director or assigned Designee. If reimbursement is for the Chair, leave blank and Denise Matias will sign.

Honorariums
- Payees must not work for the state
- Need original signed W-9 (UCF W-9 can be used found at: http://www.fa.ucf.edu/Forms/Forms.cfm >Vendor Payable>UCF Substitute W9)(For the first time Foundation is paying the individual. If the address has changed for a payee an updated W-9 is needed.)
- Original Certification of Independent Contractor form (Chair/Director/assigned Designee of CAH unit initial by signature line. Dean/Dean Designee will sign for College.)
- Original invoice must be signed by the payee
Reimbursement for Individuals or Company’s Format

- Payment to companies or individuals for services, purchases, and/or entertainment and reimbursements to individuals
- Invoices for individuals that do not have a Federal ID number and who are using a social security number for tax reporting purposes must sign the original invoice. Note: Social security number does not go on invoice.
- Reimbursements for interviewees must list the UCF position, such as “Assistant Professor”

**EXAMPLE**

<table>
<thead>
<tr>
<th>University of Central Florida Foundation, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAYMENT AUTHORIZATION REQUEST FORM</td>
</tr>
<tr>
<td>Mailing Address:</td>
</tr>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Date Prepared:</td>
</tr>
<tr>
<td>Coordinates Project Name:</td>
</tr>
<tr>
<td>Name of Foundation Account:</td>
</tr>
</tbody>
</table>

**DESCRIPTION**

- Description of Purchase/Reimbursement: (Who, What, Where, When)
  - Who: Name of Payee
  - What: Reimburse for lunch and dinner with John Smith, search candidate for Assistant Professor position in department (position # 22495)
  - Where: UCF Market Place and Olive Garden
  - When: 2/10/14 and 2/11/14

- 2/10/14 Lunch at the UCF Marketplace. Attendees: John Smith (Candidate), Name of Payee, Name (All faculty members) 20.00
- 2/11/14 Dinner at Olive Garden. Attendees: John Smith (Candidate), Name of Payee, Name (All faculty members) 35.00

**Date the Goods or Services were received:** 2 Month 14 Year

**FOR FOUNDATION USE ONLY**

<table>
<thead>
<tr>
<th>Account Number</th>
<th>Amount</th>
<th>Approved Chair/Director/Designee Signature</th>
<th>Approved UCF Foundation, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>CAH Dean’s Office Signature</td>
<td>UCF Foundation, Inc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Authorized Sign on Project</td>
<td></td>
</tr>
</tbody>
</table>

**INSTRUCTIONS:**

- This form is to be used by all departments for UCF Foundation, Inc. disbursements.
- 1. Send this Payment Authorization with original signatures (Photo copies are not acceptable).
- 2. Original detailed invoices/receipts are required. For reimbursements must show proof of payment.
- 3. Reimbursement for entertainment must show business purpose of the function and personal in attendance.
- 4. All expenses report from any travel account exceeding $10,000 must have the appropriate vice president’s signature or the president’s signature for all operating projects, the Director of Athletics.
- 5. Refer to Foundation policy for additional documentation needed.
- 6. Send to 12414 Research Parkway, Suite 140 Orlando, FL 32817 or Campus Mail (sys 4-0045).

**CHECK NUMBER**

**Attachments to this Payment Authorization:**

- Original detailed receipt along with pay stub for UCF Marketplace taped to an 8 ½ x 11 piece of paper
- Original detailed receipt along with pay stub for Olive Garden taped to an 8 ½ x 11 piece of paper
- A list of attendees to each event noting their affiliation with UCF. For long lists, please type “See attached list of attendees” and then attach the list
- A copy of John Smith’s itinerary

Updated 4/15/16
Reimbursement to UCF

- Expenses must already be paid from the E&G or Auxiliary account.
- Attach a copy of the Actuals DataMart document for expense charges.
- Attach the Cost Center Report for payroll charges and highlight/mark what is being reimbursed back to area. (DataMart document not required for payroll reimbursement)
- Subtotal by account code if necessary.
- Foundation will cut a check and deposit it at the UCF Cashier’s Office. You will see the reimbursement post as a STFXXXXXXX journal.

**EXAMPLE**

<table>
<thead>
<tr>
<th>Description of Purchase/Reimbursement (Who, What, Where, When)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please reimburse (Name of Department/Program) E&amp;G operation number 23XXXXXX for $1,300 account number 729X31. Travel support for Assistant Professor (Name of tunnel), who was selected out of 500 applicants to present at the _______ conference. Travel dates _______ from 4/20/14 - 4/25/14 under FOM XXXXX.</td>
</tr>
<tr>
<td>4/10/14 Dallas: Airline ticket (1,000.00)</td>
</tr>
<tr>
<td>4/21/14 Marriott: Hotel $750 (partial) (250.00)</td>
</tr>
<tr>
<td>Chair/Director capped reimbursement at $1,300 for this trip.</td>
</tr>
</tbody>
</table>

**FOR FOUNDATION USE ONLY**

<table>
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<th>Account Number</th>
<th>Amount</th>
<th>Approved Chair/Director/Designee Signature</th>
<th>Approved UCF Foundation, Inc.</th>
<th>CAN Deal’s Office Signature</th>
<th>Approved UCF Foundation, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

INSTRUCTIONS: This form is to be used by all departments for UCF Foundation, Inc. disbursements:
1. Send this Payment Authorization with original signature. (Pizza copies are acceptable)
2. Original detailed invoices/receipts are required. For reimbursements must show proof of payment.
3. Reimbursement for entertainment must show business purpose of the function and persons in attendance.
4. All expenses requests from any foundation account exceeding $10,000 must have the appropriate vice president’s vice president, president or, president’s signature for athletic projects, the Director of Athletics.
5. Refer to Foundation policies for additional documentation needed.
6. Send to 1243 Research Parkway, Suite 140 Orlando, FL 32825 or Campus Mail (zip 40045)

**CHECK NUMBER**

Attachments to this Payment Authorization:

- For backup, attach a copy of the Actuals DataMart document showing transaction lines for recording or expenses and cash disbursement.
- Invoice or receipt(s) (Copies of initial expense documents submitted to UCF upon submission of payment) (when filling out the Foundation PA make sure and explain in short detail what the item(s) was purchased for.)
- Itinerary, program, announcement, and/or attendees if applicable
Steps to follow on how to provide Foundation with proper backup of Actuals DataMart Information for funds transfer back to UCF (Schools/Department/Programs). This would be for direct expenses processed through Peoplesoft by CAH units in the form of payments made by; PO (for i.e., a vendor), UCF Pcard and ID Transfers.

Go to: Staff Applications under MyUCF Portal and select F&A DataMart. Select Actuals from the purple screen and the following screen will show: Type in the department number for number 1. For number two select either of the following depending on payment method used; PO and UCF Pcard select “Voucher Number” and for Journal select “Journal ID”.

Select Run Query and the The following screen will show up. You can either use print screen or snipping tool to copy/paste the information to a word document and print the information. “Please note that for one charge there will be four lines”
Below is an example when Journal ID is used.

**F&A DataMart**

To begin, select Reporting Period and enter the first condition in row 1. (maximum of 3 conditions)

Records available: from 07/01/2003 to 08/26/2014

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Operator</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department/Project</td>
<td>Is</td>
<td>23010001</td>
</tr>
<tr>
<td>Journal ID</td>
<td>Is</td>
<td>TC00136890</td>
</tr>
<tr>
<td>Department/Project</td>
<td>Is</td>
<td></td>
</tr>
</tbody>
</table>

Sort by Department/Project then by Voucher Number

For this particular journal there are four charges and one cash disbursement line, showing the dollars were moved out of this department number to Telecom. Paste the information to a word document and print for backup.
Other forms that may need to be included with the Payment Authorization/Short Invoice

Certification of Independent Contractor Status form
Use for payee’s requiring a 1099 at year end. An original signed W-9, an original invoice signed by payee and an original signed Independent Contractor’s form must be attached to the Payment Authorization Form.

Proof of Payment/Exception Reimbursement Request Form
First step should be for the payee to contact the vendor and request duplicate receipt. Complete Proof of Payment/Exception Form if payee is unable to obtain a receipt and bill was paid by cash or check. If paid by check, a front and back copy of the canceled check must be attached.

* Short Invoices submitted to Foundation using the Proof of payment form will be approved on a case by case basis.
* If receipt states “cash” on it Proof of Payment/Exception Request form is not needed.
* The proof of payment form is not necessary if paid by credit card. Payee must provide copy of credit card statement showing the amount and vendor paid.

Other Foundation Forms (Found on CAH Dean’s Office Website at http://www.cah.ucf.edu/fs/budget.php under Foundation)

Scholarships/Awards Form
• Use to award student scholarships
• Scholarship will not process if funds are not available
• One form may be used for multiple students under same award scholarship foundation account
• Use PIDs (student ID without the letter in front). Do not use social security numbers
• SFA Scholarship/Award Helpful Information is found on CAH Website under Foundation

Value Received Donation Transmittal Form
• For use with monetary donations
• Checks should be made payable to “UCF Foundation”
• Helpful if COAH Foundation account number is on memo section of check.

Gift In-Kind Form
• Use for donated goods and services

Helpful Links
CAH website for helpful Foundation information: http://www.cah.ucf.edu/fs/budget.php >Foundation

Foundations Policy IQ that is used by Foundation to house their written policies and related form is: https://app.policyiq.com/FoundationUCF/Default.aspx?Key=092daca4-c94d-475e-96f6-3a2d4b603766
• Use Search area to find specific topic, policies or forms.

List of approved caterers can be found on UCF Business Services at: https://businessservices.ucf.edu/university-approved-caterers.html.