

DATE: May 8, 2009

TO: Executive Committee Members, Assistant Vice Presidents,
Chairs, Directors and Department Heads, Assistants to the
Deans and Vice Presidents, Departmental Administrators and
Office Managers

FROM: Harry S. Lynch, Jr.
Executive Vice President for Business Affairs and
Chief Financial Officer

Business Affairs Bulletin No. 08 - FY 2009

SUBJECT: PAYMENTS PROCESSED ON A LOCAL/STATE VOUCHER

The Health Science Center recently underwent an audit of expenditures by the State of Texas Comptroller of Public Accounts. In response to this audit, the institutional Local/State Voucher form has been revised to ensure that proper documentation is maintained to verify that payments are valid. In accordance with the Texas Administrative Code Title 34 Sec. 5.51(c)(1)(D), it is the responsibility of a state agency and its officers and employees to “ensure for each purchase document, the agency maintains necessary documentation for proving that each payment resulting from the document is legal, proper, and fiscally responsible.”

The Local/State Voucher form was revised to include in the Agency Certification statement that *“the price appearing on the attached invoice, or supporting documentation, is consistent with the price negotiated with the vendor at the time the item was ordered.”* Departments should ensure and validate that the price agreed to with the vendor at the time the order was placed agrees with the amount invoiced by the vendor and submitted for payment on the Local/State Voucher.

Types of Services for State and Local Purchases paid on a Local/State Voucher are contained in the HSC Handbook of Operating Procedures Policy 6.1.5. Procedures for completing a Local/State Voucher are contained in HSC Handbook of Operating Procedures Policy 6.1.8.

The Local/State Voucher form has been updated on the institutional Forms Master list located at <http://www.uthscsa.edu/business/forms.shtml>. Please discontinue use of the old form and begin using this revised form immediately. If you have any questions regarding this change, please contact Virginia Rojas, in The Office of Accounting at 2-6230.

**PLEASE DISTRIBUTE THIS INFORMATION TO THE APPROPRIATE
INDIVIDUALS IN YOUR DEPARTMENT.**

LOCAL/STATE VOUCHER

Handling – Accounting Use Only <input type="checkbox"/> Bursar <input type="checkbox"/> Regular <input type="checkbox"/> Employee <input type="checkbox"/> Special Handling		DOC. NO.		Voucher Date & Number	
Pay To:		Vendor Number		Voucher Total	
		Department Name:			
		Contact Person:			
		Phone & E-mail:			
		Instructions:			
Account (Accounting Use)	Fund	Dept. ID	Sub-Class (Optional)	Project ID	Amount
Date of Delivery or Service	Invoice # (if applicable)	Description of Articles or Services		Quantity	Amount
<p>*Agency Certification</p> <p>I certify that the above services were rendered, or goods received. In addition, the price appearing on the attached invoice, or supporting documentation, is consistent with the price negotiated with the vendor at the time the item was ordered. I also certify that the amount is unpaid, legal, proper and fiscally responsible.</p> <p>Price Verified By: _____ Date: _____</p> <p style="text-align: center;"><i>Signature</i></p>					
*Recipient's Signature		Witness Signature			
*Authorized Signature		Accounting Approval			
*Authorized Signature		Accounting Approval			
Prompt Payment Law – Accounting Use Only					
PPL? Yes or No (Circle)		Base Date:		Req. Payment Flag:	
Interest Calculation (I/C):		Reason Code:			

Original To Accounting / Retain Copy For Dept. Record