Syracuse University
COLLEGE OF LAW

Student Organization Orders & Reimbursements Guide

2017-2018

Office of Student Affairs
Syracuse University College of Law
Dineen Hall
315-443-1146
http://www.law.syr.edu/student-affairs/
lawstudentaffairs@law.syr.edu

There are four types of financial forms that are commonly used by Syracuse University College of Law student organizations and publications. They include:

1. Purchase Requisitions (PRs) (External payments)
2. Interdepartmental Order Forms (IDs) (SU Dept. payments)
3. Employee Expense Reimbursement Request
4. Travel Reimbursement Forms

Each of these forms will be discussed in detail below; samples are attached for your reference. Should you have any questions about any of these forms, please contact the Office of Student Affairs.

I.   Purchase Requisitions

Purchase Requisitions are generally used for one of two reasons: (1) To purchase food from one of our pre-approved food vendors, or (2) For reimbursements to students who are not employees of Syracuse University when they make organization-related purchases (food, supplies, trophies, or any allowed purchase).

<u>Who are the approved food vendors?</u>

Peppino's Pizza
(315) 422-8811
409 S Clinton St
Syracuse, NY 13202

Jimmy John's
(315) 479-7827
103 Marshall St
Syracuse, NY 13210

Mark's Pizzeria
(315) 463-5672
376 Grant Blvd
Syracuse, NY 13206

Varsity Pizza
(315) 478-1235
802 S. Crouse Ave
Syracuse, NY 13210

<u>How do I purchase food with a purchase requisition?</u>

1. Visit Student Affairs, Suite 214, to sign out a Purchase Requisition Form.
2. Call one of the approved vendors and order your food. At time of order, notify vendor that you will be paying with a Syracuse University Purchase Requisition Form. **Write down the total cost of your order, including tip** (not to exceed 20%)**.**
3. Fill out the Purchase Requisition Form; see below, and attached samples **PR1**-**PR4**.
4. Return the completed Purchase Requisition to Student Affairs, Suite 214, with a printed copy of an email from the Organization Treasurer approving the purchase. Note: The approval email should be detailed:
   ➢ *Example: "As the Treasurer of ABC Org, I approve the purchase of Peppino's Pizza for $75.59 for the December 14, 2017 general body meeting. From, X Student."*
   Note that if you are using SBA-approved funds, you must also include an approval email from the SBA Treasurer.
5. **Purchase Requisitions for outside vendors must be submitted to Student Affairs at least 7 days before the event.** PRs submitted less than a week before scheduled food delivery may be refused, in which case the organization may be forced to cancel the order or acquire separate finances.

6. The signed and approved Purchase Requisition will be emailed to the student accepting food delivery. This document must be printed and handed to the delivery driver upon receipt of food.
7. The receipt from the delivery driver must be submitted to the Office of Student Affairs by the next business day following the food delivery.
   - ➤ Organizations that fail to submit a receipt will be responsible for contacting the vendor and getting another copy of the receipt. The failure to submit receipts will lead to a hold on the student organization's account.

How do I fill out a Purchase Requisition for an outside vendor?

There are 7 areas of a PR form where students must input data:

1. Requisition Date: enter the date when you are filling out the form.
2. Chart String: Enter 11 in the "fund" block, 21702 in the "department" block, and enter your organization's unique MyCode in the "mycode" block.
3. "Requested by" block should have the acronym for the student org, followed by "(org)"
4. The "vendor name and number block" should include the vendor's full name, address, and telephone number.
5. The requisition department name and address block should always say the following:
   > COL – Student Affairs
   > 214 Dineen Hall

6. The "deliver to" block should always have the other box checked.
7. The large textbox area is for you to input the business purpose of the order. There are 3 sections:
   a. A description of what was purchased that includes the full name of the organization (not the acronym).
   b. 3 consecutive lines that detail the subtotal, delivery/tip, and finally the sum of the two previous lines, labeled "check total."
   c. The lowest line of the main textbox area should say "Date of event:" and then the date that the food is scheduled for delivery.

How do I fill out a PR for a non-employee student reimbursement?

Using a purchase requisition for non-travel, non-employee student reimbursements are exactly the same as using them to purchase food from pre-approved vendors. There are only a few differences:

- The date of event can be included in the description of what was purchased, and not on the lower line.
- There is an additional required line that follows the description, labeled "total," that has the total reimbursement amount.
- The 3 consecutive lines are not subtotal, delivery/tip, and check total – instead they are: Check payable to, SUID, and email.
- Receipts must be submitted with the original completed PR.

How do I submit my receipts (this is IMPORTANT!)?

Receipts must be both itemized and show proof of purchase.

In the image to the right, the left side shows the itemized part of the receipt, where it details exactly what was purchased. The right side shows the proof of purchase. The proof of purchase is where it says "Paid check" "Paid Visa" and "Paid Cash"

Sometimes the receipts are separated into two receipts, one itemized and the other with proof of purchase. **In order to be reimbursed, students must submit BOTH receipts, the itemized AND the signed proof of purchase.** The absence of one of these receipts will prevent reimbursement for this purchase, and will be treated the same as no receipt.

The number one reason why students fail to be reimbursed is that they are missing one-half of this equation. They have the itemized without the proof or the proof without the itemized. Both are required.

If the purchase was made by credit card, please also provide a copy of the front and back of the credit card(s) used. (This is required to ensure that reimbursement is being made to the person named on the credit card.)

SYRACUSE UNIVERSITY
REQUISITION

REQUISITION NUMBER	REQUISITION DATE	NOTE: IF EMERGENCY PURCHASE ORDER WAS OBTAINED, WRITE NUMBER HERE ⟶	PURCHASE ORDER NO.
(1)	X/XX/XX		
	DATE NEEDED		

CHART STRING	SPONSORED AWARDS / COST SHARING	WORK ORDER	REQUESTED BY	EXT	HAND WRITTEN APPROVAL (NO INITIALS)
(2) 1 1 21702	XXXXXX	(3)	XXX (org)		
			PREPARED BY	EXT	

FUND(2) DEPARTMENT(5) PROGRAM(5) ACCOUNT(6) MYCODE(6) PROJECT(5) ACTIVITY(3) BUD REF(2)   PRINTED OR TYPED APPROVAL

VENDOR NAME AND NUMBER	DELIVERY LOC. CODE	REQUESTING DEPARTMENT NAME AND ADDRESS (DEPARTMENT MUST COMPLETE)	
(4) • Vendor name street address city, state, zip (xxx) xxx - xxxx		(5) COL - Student Affairs 220 Dineen Hall	UNIVERSITY POLICY MAY REQUIRE COMPETITIVE BIDDING ON THIS REQUEST. ANY WAIVER OF COMPETITIVE BIDDING PRACTICES MAY REQUIRE A DETAILED, WRITTEN JUSTIFICATION FROM THE END USER, SUBJECT TO APPROVAL BY THE DIRECTOR OF PURCHASING AND/OR THE COMPTROLLER.
	ORDER DATE	(6) DELIVER TO: SYRACUSE UNIVERSITY ☐ MATERIALS DISTRIBUTION AND WAREHOUSE SERVICES ☐ PHYSICAL PLANT ☒ OTHER (SPECIFY)	

TERMS	FOB POINT	TOTAL COST ⟶		YOUR QUOTATION	DELIVERY WANTED BY	MSDS	GROUP

IMPORTANT: TYPE OR PRINT COMPLETE SPECIFICATIONS IN SEQUENCE TO AVOID ERROR OR DELAY

ITEM	QTY	UNIT	CODE	(CASE PACKING) MFG. NAME CATALOG NO. ARTICLE DESCRIPTION, COLOR, SIZE	DEPT EST	UNIT PRICE	DISC
			(7)	Provide business purpose			
				Subtotal = $ X.XX			
				delivery/tip = $ X.XX			
				check total = $ X.XX			
				Date of event : X/XX/XX			

STANDARD INSTRUCTION

CONFIRMATION OF VERBAL ORDER GIVEN TO   ON

SUGGESTED VENDORS/REMARKS

PURCHASING APPROVAL
COMPTROLLER'S APPROVAL
PURCHASING AGENT   PRE-AUDIT APPROVAL

☐ PHYSICAL PLANT - SEND ORIGINAL TO 285 AINSLEY DRIVE
☐ PURCHASING - SEND ORIGINAL TO DISBURSEMENTS PROCESSING, 108 SKYTOP OFFICE BUILDING

FORM 32001-013

PR1

SYRACUSE UNIVERSITY
REQUISITION

DO NOT WRITE IN SHADED AREAS			

REQUISITION NUMBER	REQUISITION DATE	NOTE: IF EMERGENCY PURCHASE ORDER WAS OBTAINED, WRITE NUMBER HERE ⟶	PURCHASE ORDER NO.
	X/xx/xx		
	DATE NEEDED		

CHART STRING					SPONSORED AWARDS / COST SHARING	WORK ORDER	REQUESTED BY EXT	HAND WRITTEN APPROVAL (NO INITIALS)
11 21702				XXXXXX			XXX (org)	
							PREPARED BY EXT	
FUND(2) DEPARTMENT(5) PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	PROJECT(5)	ACTIVITY(3) BUD REF(2)				PRINTED OR TYPED APPROVAL

VENDOR NAME AND NUMBER	DELIVERY LOC. CODE	REQUESTING DEPARTMENT NAME AND ADDRESS (DEPARTMENT MUST COMPLETE)	UNIVERSITY POLICY MAY REQUIRE COMPETITIVE BIDDING ON THIS REQUEST. ANY WAIVER OF COMPETITIVE BIDDING PRACTICES MAY REQUIRE A DETAILED, WRITTEN JUSTIFICATION FROM THE END USER, SUBJECT TO APPROVAL BY THE DIRECTOR OF PURCHASING AND/OR THE COMPTROLLER.
• Vendor name street address city, state zip (xxx) xxx - xxxx		COL - Student Affairs 220 Dineen Hall	
	ORDER DATE	DELIVER TO: SYRACUSE UNIVERSITY ☐ MATERIALS DISTRIBUTION AND WAREHOUSE SERVICES ☐ PHYSICAL PLANT ☒ OTHER (SPECIFY)	

TERMS	FOB POINT	TOTAL COST ⟶		YOUR QUOTATION	DELIVERY WANTED BY	MSDS	GROUP

IMPORTANT: TYPE OR PRINT COMPLETE SPECIFICATIONS IN SEQUENCE TO AVOID ERROR OR DELAY

ITEM	QTY	UNIT	CODE	(CASE PACKING) MFG. NAME CATALOG NO ARTICLE DESCRIPTION, COLOR, SIZE	DEPT EST	UNIT PRICE	DISC
				Provide business purpose			
				Subtotal = $ X.xx			
				delivery/tip = $ X.xx			
				check total = $ X.xx			
				Date of event: X/xx/xx			

STANDARD INSTRUCTION

CONFIRMATION OF VERBAL ORDER GIVEN TO   ON

SUGGESTED VENDORS/REMARKS

	PURCHASING APPROVAL
	COMPTROLLER'S APPROVAL

☐ **PHYSICAL PLANT - SEND ORIGINAL TO 285 AINSLEY DRIVE**
☐ **PURCHASING - SEND ORIGINAL TO DISBURSEMENTS PROCESSING, 108 SKYTOP OFFICE BUILDING**

FORM 32001-013

	PURCHASING AGENT PRE-AUDIT APPROVAL

PR2

DO NOT WRITE IN SHADED AREAS	**SYRACUSE UNIVERSITY** **REQUISITION**	REQUISITION NUMBER	REQUISITION DATE	NOTE: IF EMERGENCY PURCHASE ORDER WAS OBTAINED, WRITE NUMBER HERE —	PURCHASE ORDER NO
		460462	3/30/17 DATE NEEDED		

CHART STRING					SPONSORED AWARDS / COST SHARING	WORK ORDER	REQUESTED BY	HAND WRITTEN APPROVAL (NO INITIALS)
11	21702	21413	561003	301437	·		FLS (org)	

PREPARED BY   EXT
Quintal   ~1146

VENDOR NAME AND NUMBER

· Jimmy Johns
103 Marshall St.
Syracuse, NY 13210
(315) 479-7827

DELIVERY LOC. CODE	REQUESTING DEPARTMENT NAME AND ADDRESS (DEPARTMENT MUST COMPLETE)
	COL - Student Life
	220 Dinan
ORDER DATE	**DELIVER TO: SYRACUSE UNIVERSITY** ☐ MATERIALS DISTRIBUTION AND WAREHOUSE SERVICES ☐ PHYSICAL PLANT ☒ OTHER (SPECIFY)

UNIVERSITY POLICY MAY REQUIRE COMPETITIVE BIDDING ON THIS REQUEST. ANY WAIVER OF COMPETITIVE BIDDING PRACTICES MAY REQUIRE A DETAILED, WRITTEN JUSTIFICATION FROM THE END USER, SUBJECT TO APPROVAL BY THE DIRECTOR OF PURCHASING AND/OR THE COMPTROLLER.

TERMS	FOB POINT	**TOTAL** **COST →**		YOUR QUOTATION	DELIVERY WANTED BY	MSDS	GROUP

IMPORTANT: TYPE OR PRINT COMPLETE SPECIFICATIONS IN SEQUENCE TO AVOID ERROR OR DELAY

ITEM	QTY	UNIT	CODE	(CASE PACKING)	MFG. NAME	CATALOG NO.	ARTICLE DESCRIPTION, COLOR, SIZE	DEPT. EST	UNIT PRICE	DISC
				Food for Family Law Society election day.						
					subtotal : 72.00					
					delivery = 5.00					
					Check total : $77.00					
				Date of event: 4/4/17						

Please return to Quintal by 4/4

STANDARD INSTRUCTION		PURCHASING APPROVAL
CONFIRMATION OF VERBAL ORDER GIVEN TO	ON	
SUGGESTED VENDORS/REMARKS		COMPTROLLER'S APPROVAL

☐ **PHYSICAL PLANT - SEND ORIGINAL TO 285 AINSLEY DRIVE**
☐ **PURCHASING - SEND ORIGINAL TO DISBURSEMENTS PROCESSING, 108 SKYTOP OFFICE BUILDING**

FORM 32001-013

| PURCHASING AGENT | PRE-AUDIT APPROVAL |

SYRACUSE UNIVERSITY
REQUISITION

REQUISITION NUMBER	REQUISITION DATE	NOTE: IF EMERGENCY PURCHASE ORDER WAS OBTAINED, WRITE NUMBER HERE ⟶	PURCHASE ORDER NO
360141	10/13/16	DATE NEEDED	

CHART STRING					SPONSORED AWARDS / COST SHARING			WORK ORDER	REQUESTED BY	EXT	HAND WRITTEN APPROVAL (NO INITIALS)
11	21702	21413	561003	30437					FLS (org)		
									PREPARED BY Quintal	EXT 1146	PRINTED OR TYPED APPROVAL

FUND(2) · DEPARTMENT(5) · PROGRAM(5) · ACCOUNT(6) · MYCODE(6) · PROJECT(5) · ACTIVITY(5) · BUD REF(2)

VENDOR NAME AND NUMBER

DELIVERY LOC. CODE	REQUESTING DEPARTMENT NAME AND ADDRESS (DEPARTMENT MUST COMPLETE)
	COL - Student Life
	220 Dineen

ORDER DATE

DELIVER TO: SYRACUSE UNIVERSITY
- ☐ MATERIALS DISTRIBUTION AND WAREHOUSE SERVICES
- ☐ PHYSICAL PLANT
- ☑ OTHER (SPECIFY)

UNIVERSITY POLICY MAY REQUIRE COMPETITIVE BIDDING ON THIS REQUEST. ANY WAIVER OF COMPETITIVE BIDDING PRACTICES MAY REQUIRE A DETAILED, WRITTEN JUSTIFICATION FROM THE END USER, SUBJECT TO APPROVAL BY THE DIRECTOR OF PURCHASING AND/OR THE COMPTROLLER.

TERMS	FOB POINT	TOTAL COST ⟶			YOUR QUOTATION	DELIVERY WANTED BY	MSDS	GROUP

IMPORTANT: TYPE OR PRINT COMPLETE SPECIFICATIONS IN SEQUENCE TO AVOID ERROR OR DELAY

ITEM	QTY	UNIT	CODE	(CASE PACKING) MFG. NAME CATALOG NO. ARTICLE DESCRIPTION, COLOR, SIZE	DEPT EST	UNIT PRICE	DISC
				Reimbursement for drinks provided at Family Law Society screening of "Speechless" on 9/21/16, open to student body.			
				total = $7.00			
				Check Payable to: John Doe			
				SU ID: 123456789			
				email jdoe@syr.edu			

STANDARD INSTRUCTION

CONFIRMATION OF VERBAL ORDER GIVEN TO _____ ON _____

SUGGESTED VENDORS/REMARKS

PURCHASING APPROVAL
COMPTROLLER'S APPROVAL
PURCHASING AGENT   PRE-AUDIT APPROVAL

☐ **PHYSICAL PLANT - SEND ORIGINAL TO 285 AINSLEY DRIVE**
☐ **PURCHASING - SEND ORIGINAL TO DISBURSEMENTS PROCESSING, 108 SKYTOP OFFICE BUILDING**

FORM 32001-013

PR4

II.   Interdepartmental Order

An interdepartmental order form is used for making purchases from Syracuse University departments (Neporent Café, Catering, Bookstore).

How do I make orders with an interdepartmental order form?

Similar to a purchase requisition, interdepartmental order forms must be acquired from Student Affairs, Suite 214. However, unlike PRs, there is no need for a student to check out an interdepartmental order form. **When you come to 214 to fill out an interdepartmental organization form, make sure you bring a copy of the Treasurer's written/emailed approval of your purchase**. Similar to the PR, the approval email should be detailed:

> ➢ *Example: "As the Treasurer of ABC Org, I approve the purchase of wraps from the Neporent Cafe for $82.27 for the December 14, 2017 career panel presentation. From, X Student."*

Note that if you are using SBA-approved funds, you must also include an approval email from the SBA Treasurer (in similar detail to the above).

Neporent Café orders can be submitted on the spot. To do this, determine what you want to order using the "Order Menu" form (see attached), fill it out, and obtain an email from the organization Treasurer approving the purchase. Bring all of these to Student Affairs when you come to complete your interdepartmental order form.

Likewise, orders from the **SU Bookstore, Schine Copy Center, Catering or any Syracuse University department** will be accompanied by some form of invoice or quotation. Bring the invoice or quotation and Treasurer approval email to Student Affairs and you will be able to complete and submit the interdepartmental order form on the spot.

How do I fill out an Interdepartmental Order form?

There are 6 steps to filling out an interdepartmental order form (see attached example **ID1 – ID5**).

1. The "Charge Dept" line should always read "College of Law – Student Affairs"
2. Chart String: Enter 11 on the "fund" line, 21702 on the "department" line, and enter your organization's unique MyCode on the "mycode" line.
3. Enter the total amount as calculated on the Order Menu form or as quoted on the invoice.
4. Enter vendor name (i.e., Neporent Café).
5. The "Deliver To" fields will always be the same.
   a. Department is "COL – Student Affairs"
   b. Address is "214 Dineen Hall"
   c. End User is the full name of the student organization – not the acronym.
   d. Date of Order is the day the form is being filled out.
6. In the large textbox area, input the business purpose of the order. There are 2 sections:
   a. A description of what was purchased that includes the full name of the organization (not the acronym).
   b. The lowest line of the main textbox area should say "Date of event:" and then the date whatever is being purchased will be acquired. This is always included for

SYRACUSE UNIVERSITY INTERDEPARTMENTAL ORDER

(1)

CHARGE DEPT	College of Law - Student Affairs	AUTHORIZED SIGNATURE	

(2)

FUND(2)	DEPT(5)	PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	SPONSORED AWARDS/COST SHARING PROJECT(5)	ACTIVITY(3)	BUD REF(2)	
11	21702			XXXXXX				(3) TOTAL $X.XX
								TOTAL ____
								TOTAL ____

(4)

CREDIT DEPT	Vendor Name	AUTHORIZED SIGNATURE	

FUND(2)	DEPT(5)	PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	SPONSORED AWARDS/COST SHARING PROJECT(5)	ACTIVITY(3)	BUD REF(2)	
								TOTAL ____
								TOTAL ____
								TOTAL ____

(5)

DELIVER TO:	DEPARTMENT	ADDRESS	END USER
	COL- Student Affairs	220 Dineen Hall	Full org Name

DATE OF ORDER	DELIVERY WANTED BY	REQUESTED BY	PHONE NO.	PHYSICAL PLANT WORK ORDER AND PROJECT NO.
x/xx/xx				

QTY	UNIT	STOCK NUMBER IF APPLICABLE	ITEM	DESCRIPTION	DO NOT WRITE IN PRICE COLUMNS	UNIT PRICE DOLLARS	CENTS	EXTENSION DOLLARS	CENTS
		(6) Provide business purpose.							
		Date of Event x/xx/xx							

FORM 32001-018

ID1

21/381

PART 1 - ACCOUNTING COPY

FORM 32001-018

CHARGE DEPT	College of Law - Student Affairs			AUTHORIZED SIGNATURE				
FUND(2)	DEPT(5)	PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	SPONSORED AWARDS/COST SHARING PROJECT(5)	ACTIVITY(3)	BUD REF(2)	
11	21702			XXXXXX				TOTAL $ X.XX
								TOTAL
								TOTAL

CREDIT DEPT	Vendor Name			AUTHORIZED SIGNATURE				
FUND(2)	DEPT(5)	PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	SPONSORED AWARDS/COST SHARING PROJECT(5)	ACTIVITY(3)	BUD REF(2)	
								TOTAL
								TOTAL
								TOTAL

DELIVER TO:	DEPARTMENT	ADDRESS	END USER
	COL - Student Affairs	220 Dineen Hall	Full Org Name

DATE OF ORDER	DELIVERY WANTED BY	REQUESTED BY	PHONE NO.	PHYSICAL PLANT WORK ORDER AND PROJECT NO.
X/XX/XX				

QTY	UNIT	STOCK NUMBER IF APPLICABLE	ITEM	DESCRIPTION	DO NOT WRITE IN PRICE COLUMNS	UNIT PRICE DOLLARS	CENTS	EXTENSION DOLLARS	CENTS
		Provide business purpose.							
		Date of Event x/xx/xx							

ID2

CHARGE DEPT: College of Law - Student Life

AUTHORIZED SIGNATURE

FUND(2)	DEPT(5)	PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	PROJECT(5)	ACTIVITY(3)	BUD REF(2)	
11	.21706	21447	561002					TOTAL $14.15
								TOTAL
								TOTAL

CREDIT DEPT: Noporat Cafe

AUTHORIZED SIGNATURE

SPONSORED AWARDS/COST SHARING

FUND(2)	DEPT(5)	PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	PROJECT(5)	ACTIVITY(3)	BUD REF(2)	
								TOTAL
								TOTAL
								TOTAL

DELIVER TO:	DEPARTMENT Student Life	ADDRESS 220 Dineen Hall	END USER Student Life

DATE OF ORDER 3/28/17	DELIVERY WANTED BY	REQUESTED BY Quintol	PHONE NO. x1146	PHYSICAL PLANT WORK ORDER AND PROJECT NO.

QTY	UNIT	STOCK NUMBER IF APPLICABLE	ITEM DESCRIPTION		
		Water for National Law School Mental Health Day. Open to student body.		Please return to Quintol
		Date of event: 3/28/17		by 3/28

FORM 32001-018

PART 1 - ACCOUNTING COPY

Sbarro Pizza

Cheese	$12.99		
Pepperoni	$14.49		
Sausage	$14.49		
Buffalo Chicken	$14.49		
Supreme	$14.49		
Three Cheese Pizza	$37.99		

Extras

Dozen assorted cookies	$4.79		
Dozen assorted half moons	$9.49		
Dozen assorted cupcakes	$7.25		
Dozen premium cupcakes	$8.50		Flavors: carrot cake, chocolate peanut butter, chocolate raspberry, death by chocolate, red velvet, (vanilla/lemon/raspberry), (vanilla/strawberry/cream cheese)
Dozen Brownies	$7.50		
Dozen assorted danish	$10.99		
Dozen assorted doughnuts	$7.99		
Dozen assorted muffins	$5.49		
Dozen assorted bagels	$9.29		

Drinks

Coffee to Go	$15.69		
Aquafina Water 20 oz (24 btls)	$14.15	1	
Ocean Spray Apple 12/16 oz	$15.15		
V-8 Juice 24/12oz	$26.45		

158521

CHARGE DEPT	American Association for Justice			AUTHORIZED SIGNATURE					

FUND(2)	DEPT(5)	PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	PROJECT(5)	ACTIVITY(3)	BUD REF(2)	
11	21706	21427	560503	301802				TOTAL 291.00
								TOTAL
								TOTAL

SPONSORED AWARDS/COST SHARING

CREDIT DEPT	Schine Copy Center			AUTHORIZED SIGNATURE				

FUND(2)	DEPT(5)	PROGRAM(5)	ACCOUNT(6)	MYCODE(6)	PROJECT(5)	ACTIVITY(3)	BUD REF(2)	
								TOTAL
								TOTAL
								TOTAL

SPONSORED AWARDS/COST SHARING

DELIVER TO:	DEPARTMENT	ADDRESS	END USER
	COL-Student Life	220 Dineen Hall	AAJ

DATE OF ORDER	DELIVERY WANTED BY	REQUESTED BY	PHONE NO.	PHYSICAL PLANT WORK ORDER AND PROJECT NO.
		Quintal	x1146	

QTY	UNIT	STOCK NUMBER IF APPLICABLE	ITEM	DESCRIPTION		UNIT PRICE DOLLARS	CENTS	EXTENSION DOLLARS	CENTS
		Enlargements and mounting of 5 posters							
		- Quotation #150588							

DO NOT WRITE IN PRICE COLUMNS

FORM 32001-018

FINISHING OPTIONS:

STAPLING

3 HOLE PUNCH

SADDLESTICH

TRIM

OTHER mounted @ Bookstore ⑤ @ 30.00 = **TOTAL** 150.00

POSTERS/ KIOSKS

(sold by the foot, not in inches)

SIZE/ TOTAL SQ. FT.		PRICE ($) PER SQ FT.	
⑤ 24 x 36	x@	28.20 each	= **TOTAL** 141.00
	x		=
	x		=

OTHER   Pickup / Delivery

GRAND TOTAL *   291.00

*Due to material costs, this quote is valid for 30 days. Additional costs may also incur based on actual job specifications

WHITE COPY - CUSTOMER; YELLOW COPY - BILLING

Neporent Café

48 Hrs Notice, Monday orders must be placed by Thursday AM

Item	Price	Quantity	Comments
Platters			
Sub or Wrap Tray (choice of 8 subs or wraps cut in half) Turkey, Tuna, Ham, chicken Salad	$35.50		Lettuce , tomato, and condiments included. Bag of Chips included.
Small domestic cheese and cracker tray	$24.75		Paper plates, cocktail napkins and disposable serving utensils included
Small fresh vegetable and dip tray	$24.75		Paper plates, cocktail napkins and disposable serving utensils included
Small fresh fruit tray	$24.75		Paper plates, cocktail napkins and disposable serving utensils included
Sbarro Pizza			
Cheese	$12.99		
Pepperoni	$14.49		
Sausage	$14.49		
Buffalo Chicken	$14.49		
Supreme	$14.49		
Three Cheese Pizza	$37.99		
Extras			
Dozen assorted cookies	$4.79		
Dozen assorted half moons	$9.49		
Dozen assorted cupcakes	$7.25		
Dozen premium cupcakes	$8.50		Flavors: carrot cake, chocolate peanut butter, chocolate raspberry, death by chocolate, red velvet, (vanilla/lemon/raspberry), (vanilla/strawberry/cream cheese)
Dozen Brownies	$7.50		
Dozen assorted danish	$10.99		
Dozen assorted doughnuts	$7.99		
Dozen assorted muffins	$5.49		
Dozen assorted bagels	$9.29		
Drinks			
Coffee to Go	$15.69		
Aquafina Water 20 oz (24 btls)	$14.15		
Ocean Spray Apple 12/16 oz	$15.15		
V-8 Juice 24/12oz	$26.45		

ID5

food orders or photographers – but there are some interdepartmental order requests where this will not be included because it is not relevant. See Student Affairs if you have questions on this.

    c. Whenever you have an invoice or quotation number, include that in the main text area of the form, preferably on the bottom and in a noticeable way.

III.   Employee Expense Reimbursement Request

Purchase Requisitions are used for reimbursing non-employees, but a separate form is used for reimbursing Syracuse University employees. This form is used for reimbursement of ***non-travel-related*** SU employee expenses. If you get this electronic form from the Student Affairs Office, a few fields will generally already have values in them, and you will only need to input data like SU ID#, employee name, date, the date of the purchase, details, and amount, and then the familiar chart string information. See the attached example, page **ERR1**.

Unlike the other forms, this document should be emailed to lawstudentaffairs@law.syr.edu in conjunction with the submittal of receipts. Please remember that all the requirements associated with receipt submittal will also apply to this request form (see the "PR" section above, page 4, for instructions on submitting receipts). The form must also be accompanied by an email approval from the organization Treasurer (see previous sections for language example) and, if the reimbursement is using SBA funding, from the SBA Treasurer as well. Finally, take note of the "Employee Signature" line beneath the date. This form must be signed by the student/employee before submitting to the Student Affairs Office.

IV.   Travel Reimbursement Request

Student travel is reimbursed with a separate form than other organization reimbursements. Both employees and non-employees use the same form. On first glance, the travel reimbursement form looks complex, but there are actually only a few sections that require input.

1. Input your name into the "Traveler's name" box [K26] on the Daily Detail worksheet, which will automatically populate the "Name" field [B9] on the attached Expense Rpt worksheet (see **TRR1 – TRR2** examples, attached).
2. Input your departure date [D33] and return date [H33] on the Expense Rpt worksheet, and then use those same dates to fill out the "travel dates" [D5, E5,...] on the Daily Detail worksheet.
3. On the <u>Expense Rpt</u> worksheet:
   a. Select either employee [F7] or non-employee [H7]
   b. Input SUID in H9
   c. Select citizenship status [I16]
   d. Input business purpose in [E28]. Should always begin "COL student participation with..."
   e. Input travel points[C31], which is your beginning location, destination, then return destination. Do not include flight layovers.
4. On <u>Daily Detail</u> worksheet:
   a. Organize all your receipts by day, then input each reimbursement value in the accompanying day on the worksheet.
   b. **Food reimbursements are capped at $25 per meal and $50 per day. Note that alcoholic beverage purchases are not reimbursable.**

Similar to the previous form, this document should be emailed to lawstudentaffairs@law.syr.edu or dropped off at the Office in conjunction with the submittal of receipts. Please remember that all the requirements associated with receipt submittal will also apply to this request form (see the "PR" section above, page 4, for instructions on submitting receipts). The form must also be accompanied by an email approval from the organization Treasurer (see previous sections for language example) and, if the reimbursement is using SBA funding, from the SBA Treasurer as well.

Syracuse University

Employee Expense Reimbursement Request

For reimbursement of an employee's out-of-pocket expenses.

SU ID #	314502035
Employee Name	Jane Doe
Campus Dept	Office of Student Life
Campus Address	220 Dineen Hall
Prepared By	
Ext #	1146

Voucher # _____

Date 2/21/17

Employee Signature _____

Supervisor Name (Print) Deborah S. O'Malley

Supervisor Signature _____

Date	Business Purposes of Reimbursement (Attach Supporting Receipts to the **back** of this form)	Amount
2/6/17	Food for Diversity Wek	63.11
	Total	$63.11

Fund (2)	Dept # (5)	Program (5)	Account (6)	My Code (6)	Sponsored Awards/CostSharing Project (5)	Activity (3)	Bud Ref (2)	Type in Authorized Signer's Name Below	Amount
11	21702			301400				Barbara Heitzman	$63.11

Authorized Signature _____

Fund (2)	Dept # (5)	Program (5)	Account (6)	My Code (6)	Sponsored Awards/CostSharing Project (5)	Activity (3)	Bud Ref (2)	Type in Authorized Signer's Name Below	Amount

Authorized Signature _____

9/5/08 Edition

ERR 1 -

8/22/2017

SYRACUSE UNIVERSITY

DETAIL OF DAILY OUT OF POCKET EXPENDITURES

Enter your out of pocket expenses for each day on the proper line

		A	B	C	D	E	F	G	H	I	J	K	L	M	N
5	(1)	TRAVEL DATES ➡			5/22/17	5/23/17	5/24/17	5/25/17	5/26/17						TOTALS
6	(2)	Airline, Train, ETC.													
7	(3)	Personal Auto Miles													
8		Rental Car & Gasoline													
9		Taxi							30.06						30.06
10		Subway													
11		Tolls													
12		Parking													
13		Motel/Hotel													
14		Breakfast							5.67						5.67
15		Lunch							9.70						9.70
16		Dinner				25.00	33.25	32.35	13.53						104.13
17		Conference Fees													
18		Telephone													
19	(4)	**Note Misc. Expenses Below**													
20		Baggage			25.00				25.00						50.00
21															
22															
23															
24		**TOTAL Cost paid by Employee**			25.00	25.00	33.25	32.35	83.96						$ 199.56

ATTACH RECEIPTS

TRAVELER'S NAME(Print)   Jane Doe

INSTRUCTIONS

1. Enter Travel Dates in the box at the top of each column

TRAVELER'S SIGNATURE

2. To be used only if YOU have paid

3. Enter Total Miles and the calculation will be computed at the current rate

SUPERVISOR'S NAME(Print)   Deborah S. O'Malley

4. Enter miscellaneous expense explanations in the boxes

5. Use the Expense Rpt tab below to move to Expense Report Worksheet   0.535

SUPERVISOR'S SIGNATURE

TRR 1 -

	A	B	C	D	E	F	G	H	I	J

SYRACUSE UNIVERSITY
TRAVEL VOUCHER

TRAVEL ORDER #

TRAVELER INFORMATION

Select one — ● EMPLOYEE ○ NON-EMPLOYEE

NAME Jane Doe   SU ID # 123456789

Provide home address and Social Security # below for non-employees regardless of where check is to be sent
*** FILL OUT CITIZENSHIP - USE DROP DOWN VALUES PROVIDED ***

SS #

Citizenship: US Citizen

SEND CHECK TO: ● Non-Employee as shown above   ○ Campus address below
SELECT ONE

DEPARTMENT   COL Budget Office
CAMPUS BLDG/ROOM   400 Dineen Hall

REQUIRED
DEPT CONTACT PERSON   Barb Heitzman/Quintal Stitt   PHONE #   4113

TRIP INFORMATION

UNIVERSITY BUSINESS PURPOSE   COL student participation with ABA Appellate Trial Competition

TRAVEL POINTS   Syracuse, NY - Fort Worth, TX - Syracuse, NY

DEPARTURE DATE: 5/22/17   RETURN DATE: 5/26/17

ADVANCED RECEIVED ?   Select one   ○ NO   ○ YES   AMOUNT

EXPENSE DISTRIBUTION & DEPT AUTHORIZATION

Fund(2)	Dept#(5)	Program(5)	Account(6)	MyCode(6)	Sponsored Awards/Cost Sharing			Amount
					Project(5)	Activity(3)	Bud Ref(2)	
11	21702	21447	560706					$199.56

NAME(Print)   Barbara Heitzman   Signature

Fund(2)	Dept#(5)	Program(5)	Account(6)	MyCode(6)	Sponsored Awards/Cost Sharing			Amount
					Project(5)	Activity(3)	Bud Ref(2)	

NAME(Print)   Signature

Fund(2)	Dept#(5)	Program(5)	Account(6)	MyCode(6)	Sponsored Awards/Cost Sharing			Amount
					Project(5)	Activity(3)	Bud Ref(2)	

TRR 2 -