



Procedure: Completing an Expense Refund Form

Overview: The Expense Refund Form (DT118b) is submitted to the Office of Student Financial Services for departmental deposits that are from an expense, travel or payroll reimbursement for a service or product. Expense refund forms are submitted with payment to the Cashier Department in the Office of Student Financial Services. Departments will need to complete all information on the form prior to depositing.

I. Completing the Form

- a. Check the box next to which Expense Refund Type you will be depositing.
- b. Enter your department name and the date in the spaces provided.
- c. Enter the six-digit department number and three digit fund code of the budget that you would like the deposit to process from.
- d. Enter the account number of the budget.

*NOTE: Budgetary accounts cannot be deposited to. See page 2 for list of invalid accounts.

- e. Please enter the project number for the account, if necessary. Enter any chartfields necessary.

*NOTE: All budgets with fund numbers 500-599 or 800-899 require a project ID number.

- f) Enter the amount of currency for the deposit in the appropriate spaces. The total will automatically be calculated.
- g) Enter the Vendor Name and Vendor ID number of the service or product for reimbursement in the spaces provided.
- h) Enter the Voucher #/Cash Advance ID/Employee ID, Voucher Amount and Date of Voucher in spaces provided.

*NOTE: If you have any questions on the Voucher #/Cash Advance ID/Employee ID, please contact General Accounting at 644-5010.

- i) Enter name of person responsible for deposit and phone number.
- j) Signature of person responsible for deposit and date required.

II. Submitting the Form

- a. This form can be submitted in the Office of Student Financial Services located in University Center Building A Room 1500 between the hours of 8:30am-4:30pm.
- b. This form may also be mailed with payment enclosed to:

Office of Student Financial Services
A1500 University Center
282 Champions Way
PO Box 3062394

Tallahassee, FL 32306-2394

*NOTE: No cash allowed if sending deposit by mail.

Please contact Toia Greve at 644-9724 or by email at tgreve@fsu.edu with any questions.

Invalid Account Numbers for Expense Refunds		
000000	691906	780000
000005	691907	780010
100000	692101	780100
100001	692102	780100
113001	692800	780100
140000	692801	780110
200000	692900	780140
200001	693700	780150
223001	693700	780160
225000	694002	780170
300000	694002	780200
400000	694017	780300
500000	694099	780303
600000	694801	990000
600001	694802	990003
690100	695000	
690110	697000	
690120	700000	
690130	700001	
690150	710000	
690160	710100	
690170	720000	
690180	730000	
690190	730010	
690191	730100	
690220	730300	
690400	730400	
690500	730700	
690700	730800	
690800	730810	
691000	730830	
691100	730860	
691200	730880	
691202	740000	
691203	740200	
691510	740300	
691520	740350	
691530	740500	
691535	740540	
691560	740700	
691570	741000	
691800	741530	
691903	742100	
691904	760000	
691905	770000	



Expense Refund Form

Expense Refund Type (Please Check One)

Expense

Travel Expense

Payroll

Date: _____

Depositing Department Name

Department Code

Account (cannot be a budgetary account- see instructions for details)

Fund & Project Code (Project Required for Funds 520-599 & 800-899)

Chart-field 1/2/3 (If Any)

Cash	
Check	
Money Order	
Cashier's Check	
Traveller's Check	
Total	

Vendor Name

Vendor ID#

Date of Voucher:

Voucher # / Cash Advance ID / Employee ID

Voucher Amount

Print/Type Person Responsible for Refund

Phone Number

Account number listed is not a budgetary account

If Fund Code is 520-599 or 800-899, Project Code is Listed Above

Date

Signature of Person Responsible for Refund

FOR SFS USE ONLY:

Cashier _____ Date: _____

Account # is not budgetary (Verified against list from instructions)

Verified Project/Fund. If Fund Code is 520-599 or 800-899, Project Code Entered