

## **WHEN TO USE THE MISCELLANEOUS EXPENSE VOUCHER FORM:**

- To obtain reimbursement for Petty Cash expenditures (<\$100);
- To "settle" a Working Fund General Advance (Non-travel);
- To process payments through Accounts Payable when an invoice is not available and the Visa Procurement Card is not an option;

## **HOW TO COMPLETE THE MISCELLANEOUS EXPENSE VOUCHER FORM:**

<b>Dept or Grant:</b>	Five digit department or seven digit grant code to which this expenditure should be charged.
<b>Payee Name:</b>	The name to which the check is to be made payable.
<b>Payee Address:</b>	The address where check is to be sent. If the payee is an individual, supply the home address.
<b>Amount:</b>	Amount of expenditure less state tax. Petty cash is issued for reimbursements under \$100.
<b>Payee Signature:</b>	Payee is required to sign if no supportive documentation of the expense is attached or required.
<b>Payment Reason:</b>	Supply a detailed description of exactly why this payment is to be made.
<b>Individual: EMP ID#</b>	If the payee is an employee or student, please include their employee ID. If they are not, please attach a W-9 to the MEV.
<b>Payee an Employee?</b>	Check whether or not the voucher payee is employed by Towson University.
<b>Advance Received?</b>	Check whether or not a Working Fund Advance was received for this expenditure.
<b>Citizenship?</b>	Check whether or not payee is a U.S. citizen or permanent resident alien.
<b>Petty Cash: Reimbursement (\$100 or less)</b>	Use this section to select how & where you would like to receive your petty cash reimbursement. If you select cash, you will be notified when it is available for pickup at the site that you choose. If you choose to have a check mailed to your home, please allow 2-3 weeks for processing.
<b>Signature of Requester:</b>	Signature of the TU employee requesting this payment. If a Working Fund Advance was received, the requester should be the same person that requested the advance.
<b>Authorized Budget Signature:</b>	This signature approves the expense to be charged to the speedtype as indicated. The Authorized Budget Signature is a TU employee who has an Authorized Signature Form on file permitting them to sign financial documents for charges to their department or grant. If the Authorized Budget Signature is the payee, their Supervisor must sign here.
<b>Coding Block:</b>	Supply the Speedtype and Account: the 5 digit department or 7 digit grant code and the 6 digit account (subcode) to which this expenditure is being charged and the amount.

## **WHERE TO SEND THE MISC EXPENSE VOUCHER FORM:**

Working Fund Office: For Petty Cash or if a Working Fund Advance was received.  
Accounts Payable: All other submissions

**VOUCHER AND SUPPORTIVE DOCUMENTATION WHERE REQUIRED  
MUST BE SUBMITTED IN DUPLICATE**

# MISCELLANEOUS EXPENSE VOUCHER

SPEEDTYPE: Department or Grant# \_\_\_\_\_ Initiative Value \_\_\_\_\_

Rev 04/10/17

PAYEE INFORMATION	AMOUNT	SIGNATURE PAYEE*
Payee Name:		
Address:	Email Address:	
	* Certified just and correct and payment not received. Payee signature required if no supportive documentation attached	
Individual: TU EMP ID#	Is payee a TU employee? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Payee Is A Business: FID #	Was an advance received? Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>Is Payee or beneficiary of the payment a U.S. Citizen or Permanent Resident Alien?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>		
If payment is made to a company for goods/service, does company have establishment in United States? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If No, contact the Nonresident Alien Tax Specialist at 45269; or provide payee email address: _____		

Reason for Payment:

**Petty Cash Reimbursement (\$100 or less)**  
Choose payment method below:

- \* Working Fund check disbursed by Business Travel Services, Admn Bldg., 4th floor
- \* Petty Cash disbursed by Bursar's Office, Enrollment Services, Room 336

State of MD check mailed to my home except for direct deposit participants

\*You will be notified to pick up disbursement.

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**This block for use by Financial Services**

Date: \_\_\_\_\_

Expense \$: \_\_\_\_\_

Adv. Amount: \_\_\_\_\_

Difference: \_\_\_\_\_

Adv Check#: \_\_\_\_\_

Rcpt/Chk#: \_\_\_\_\_

\_\_\_\_\_  
Signature of Requester

Approved by: \_\_\_\_\_ Date \_\_\_\_\_

Authorized Budget Signature

Complete Coding Block with Account Number and Amount			
T.U. CODE BLOCK	Vendor Code:		
Charge To (Dept or Grant)/ Account/Initiative	Invoice #:		C/P/F
	Amount	PO#:	
	\$	Invoice Date:	
	\$	Mdse. Rec. Date:	
	\$	Due Date:	
<b>Department Approval:</b>			
<b>Department Approval:</b>			

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REQUIRED MUST BE SUBMITTED IN DUPLICATE**