

EXAMPLE

Accounts Payable Voucher

* Submit to ERIKA (Morgan) Stocum in Accounting
↳ brick house on MOORE STREET

Check payable to:

WCS Signs

Address:

574 10th Street
Huntingdon, PA 16652

From:

Name:

YOUR first/last name

Department:

RSD name

Description:

Please supply proper documentation of all expenditures.
(invoices, receipts, registration forms, etc.)

**Second copy is required for prepaid orders and remittance advice.

brief description is always needed. T-shirt
payments

Amount

\$150.00

Account Number

21-XXXXX - 6199

account

object code

\$150.00

Total amount due

Signatures:

Treasurer's signature

Advisor's signature OR

(DIR/ASST. DIR of Student Activities)

Additional Information:

* please mail OR

* will pick up

W-9 attached

OR on file

Date submitted:

9/10/14

L must state this any time you pay a person OR business.

* Always make a copy for your files.

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Example complete highlighted areas + sign/date

Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

**Request for Taxpayer
Identification Number and Certification**

Give form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)

Business name, if different from above

Check appropriate box: Individual/Sole proprietor Corporation Partnership Other Exempt from backup withholding

Address (number, street, and apt. or suite no.)

City, state, and ZIP code

List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

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or

Employer identification number

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Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here

Signature of U.S. person

Date

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

SAMPLE

JUNIATA COLLEGE
Huntingdon, PA 16652

*submit to BURSAR'S
Office - Ellis Hall

CASH ADVANCE VOUCHER

Date: 9/10/14

Total Advance Needed: \$ 50.00

C.A. Receipt #: _____

Person Using Advance: First + last name

Account #: 21-XXXXX-6/99

Budget Officer's Authorization: _____

OR

Clubs - Treasurer and Club Advisor: Treasurer's signature

account #
Advisor's signature
↳ object code

Both signatures are required for student organizations.

Reason for Advance: Detailed description

Expected Date of Use: From 9 / 10 / 14 (departure)

To 9 / 12 / 14 (return)

Person Disbursing Advance: Bursar's signature

Person Receiving Advance: _____

CASH ADVANCES MUST BE CLEARED WITHIN ONE WEEK OF USE.

SAMPLE

JUNIATA COLLEGE
Huntingdon, PA 16652
CASH ADVANCE CLEAR

*submit to BURSAR'S
Office - Ellis Hall

Date: 9/12/14

Department or Organization Name: _____

RSD Name

Account Number: _____

21-XXXXX-6/99

Clear Cash Advance Receipt # _____

Cash Advance to Whom: _____

Receipts minus sales tax are attached _____

you get this from the receipt bursar gave you.
first + last name of the person that took out the advance

Original Amount

\$ 50.00

- Total Expenses

\$ 75.00

Description of purchase _____

Total Due Juniata

\$ 25.00

OR

Total Due Person

Budget Officer's Authorization: _____

OR CLUBS:

Treasurer and Club Advisor

Treasurer's signature Advisor's signature

BOTH SIGNATURES ARE REQUIRED FOR STUDENT ORGANIZATIONS

SAMPLE

JUNIATA COLLEGE

Huntingdon, PA 16652

CASH REIMBURSEMENT VOUCHER (Less than \$100)

* submit to bursar's office - Ellis Hall

Date: 9/10/14

Department or Organization Name: RSO Name

Account Number: 21-XXXXX-6199

EXPENSE REIMBURSEMENT: Original receipts attached minus sales tax

Payable To Whom: YOUR first + last name

Description: WRITE OUT REASON FOR REIMBURSEMENT

Payment Received: _____

Total Reimbursement \$75.00

Budget Officer's Authorization: _____

OR

Clubs - Treasurer and Club Advisor: TREASURER'S SIGNATURE ADVISOR'S SIGNATURE

Both signatures are required for student organizations.

sample

JUNIATA COLLEGE

Huntingdon, PA 16652

DEPOSIT VOUCHER

* submit to bursar's office - Ellis Hall

Date: 9/10/14

Department or Organization Name: RSO Name

Account Number: 21-XXXXX-4829

Deposit Description:

EXPLAIN REASON FOR DEPOSIT
↳ T-SHIRT FUNDRAISER

Total Cash \$250.00

Total Checks \$150.00

Total Deposit \$400.00

Person Authorizing the Deposit: TREASURER'S SIGNATURE