# **External Program Class Reviewer Checklist**

## **Evidence of Terms of Agreement**

* Must clearly state how much they will get paid for their services and specify the services (prior to supplying goods/services).
  + Email is acceptable

## **Invoice**

* Vendor must provide an invoice (department can provide a template, but department should not fill out the invoice themselves).
  + An acceptable invoice contains:
    - Invoice #
    - Invoice Date
    - Vendor Name & Address
    - To: SUNY Cortland, PO Box 2000, Cortland, NY 13045
    - Description of Goods/Services Requesting Payment for
    - Quantity of Goods or Date(s) of Service
    - Amount Requested

## [**Mileage**](https://www.gsa.gov/travel/plan-a-trip/transportation-airfare-rates-pov-rates-etc/privately-owned-vehicle-pov-mileage-reimbursement?gsaredirect=mileage&_gl=1%2A1w0mhrw%2A_ga%2AMTU3NjM4NDUwMi4xNjg4NzQxMTM3%2A_ga_HBYXWFP794%2AMTY4ODc0MTEzNi4xLjEuMTY4ODc0MTc2OS4wLjAuMA..)

* Allowed roundtrip mileage at current GSA rate

## [**W-9**](https://www.irs.gov/pub/irs-pdf/fw9.pdf)

* Payee is required to submit their W-9, as this is a taxable service

## **NYS Employee**

* If Payee is/has been a NYS employee within two (2) years, do not proceed with this checklist and payment will be processed via Human Resources/Payroll.
  + Must submit Form #10 to [sarah.vanliew@cortland.edu](mailto:sarah.vanliew@cortland.edu).
  + If reimbursing mileage, for NYS employee, that may be included on a Standard Voucher (see step below) and not W-9 is required for this.
  + Meals are **not** reimbursable.

## [**Standard Voucher**](https://www2.cortland.edu/offices/purchasing-office/travel-guidelines/forms/Standard%20Voucher.pdf)

1. Areas to complete on Standard Voucher:

### **Top portion – Payee Information**

1. Payee Name (first & last)
2. Email Address
3. Address (Street, City, State Zip)
   * + - 1. *(where the check will be mailed to)*

### **Middle Section – Description of Material/Service**

1. Date(s) and goods/services provided
2. Total
3. Net = Grand Total to be paid

### **Payee Certification**

1. Payee signs (no e-signature allowed)
2. Date

### **Supervisor’s Certification**

1. Dept Chair signs (no e-signature allowed)
2. Title
3. Date

### **Cost Center Unit**

1. Add account # to charge
2. Receipts & Backup
   1. Scan voucher & backup and combine into (1) PDF with Standard Voucher.
      1. Email fully signed Standard Voucher and backup to [accounts.payable@cortland.edu](mailto:accounts.payable@cortland.edu).

**Standard Voucher cannot be digitally or e-signed.**

**Signature Types:**

**NOT Allowed:**

1. Typed signature:

A screenshot of a signature

Description automatically generated

1. Digital Signature:

A close up of a logo

Description automatically generated

**ALLOWED (original signature scanned):**

1. Original, scanned

A close-up of a signature

Description automatically generated