Refunds

OVERVIEW

Departments follow the procedures discussed in this section to process refunds to individuals or organizations.

Refunds of Cash/Check Purchases

Departments generating refunds for purchases paid by cash or check complete and send a State of Washington Invoice Voucher to the University Controller. The Controller's Office makes the refund payment.

NOTE EXCEPTION: To make a cash/check refund involving the Student Accounts System contact the Student Accounts Section of the Bursar’s Office for information.

Refunds of Credit Card Purchases

A refund for a purchase charged to a credit card must be reimbursed to the credit card account charged for the purchase.

Departments generating refunds for purchases paid by credit card complete a Credit Card Refund Voucher. The voucher is the authorized invoice for processing the refund (see Credit Card Refunds).

CASH/CHECK REFUNDS

State of Washington Invoice Voucher

Complete a State of Washington Invoice Voucher for refund of purchases paid by cash or check (Fig. 1). See also BPPM 30.45.

The department enters the following information on the invoice. The numbered instructions are keyed to the numbers on the sample.

Department (1)

Enter the department name, address, and mail code.

Also enter the name of the departmental contact and the contact telephone number.

Vendor or Claimant (2)

Enter the refund recipient's name and address under Vendor or Claimant.

Also enter the employee's or student's WSU identification number under WSU ID Number.

For refunds to an individual with no WSU affiliation—Enter No WSU Affiliation under WSU ID Number.

Vendor’s Certificate (3)

The intended refund recipient signs the Vendor's Certificate.

If the recipient is unavailable, indicate Special Endorsement. The Controller's Office includes a special endorsement stamp on the check in such cases.

Description (4)

Indicate the reason for the refund under Description.
Refunds

Reference Numbers (5) Enter the reference numbers of the original transaction documents under Description. Provide the original WSU Invoice form number and the Controller's Receipt number.

Amount of Refund (6) Enter the amount of refund requested.

Authorized Signature (7) An individual with expenditure authority for the department's account signs the form. See BPPM 70.02 for an explanation of expenditure authority.

Account Code (8) Indicate the coding from the original Controller's Receipt. Check AIS Account Balances to obtain this number (see BPPM 85.33).

Routing the Voucher Send one copy of the voucher to the Revenue Manager in the Cash Management/Accounting Section of the Controller's Office.

Refund Sent If Controller's Office personnel approve the refund, a check is sent to the individual indicated on the invoice voucher.

CREDIT CARD REFUNDS

Credit Card Refund Voucher Complete a Credit Card Refund Voucher for each credit card refund (Fig. 2).

The department enters the following information on the voucher. The numbered instructions are keyed to the numbers on the sample.

Department (1) Enter the department name, address, and mail code.

Also enter the name of the departmental contact and the contact telephone number.

Claimant (2) Enter the refund recipient's name and address under Claimant.

Also, enter the employee's or student's WSU identification number under WSU ID Number.

For refunds to a claimant with no WSU affiliation, enter No WSU Affiliation under WSU ID Number.

Enter the social security number or the employer taxpayer ID number for a non-WSU individual under Social Security No. or Employer Taxpayer ID No.
## Refunds

**FIGURE 1**

### STATE OF WASHINGTON INVOICE VOUCHER

**WASHINGTON STATE UNIVERSITY 365**

<table>
<thead>
<tr>
<th>DEPARTMENT NAME</th>
<th>PURCHASE ORDER NO. OR TRAVEL AUTHORITY NO.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department name</td>
<td></td>
</tr>
</tbody>
</table>

**INSTRUCTIONS TO VENDOR OR CLAIMANT:**
Submit this form to claim payment for materials, merchandise or services. Show complete detail for each item.

### VENDOR'S CERTIFICATION

I hereby certify under penalty of perjury that the items and totals listed herein are proper charges for materials, merchandise, or services furnished to the state of Washington.

Are you a U.S. citizen?  [ ] Yes  [ ] No
If no, indicate visa type ______

BY: (Vendor/Claimant's Name)  Grantee/Title ______

It is unlawful for any state agency to deny any right, benefit, or privilege provided by law because an individual refuses to disclose his or her social security number except in specified circumstances. WSU is requiring that non-WSU individuals requesting payment from WSU disclose social security number or employer ID number (EIN) pursuant to Section 6109 of the Internal Revenue Code. When required, WSU will use disclosed social security numbers for IRS reporting purposes only.

### SAMPLE

<table>
<thead>
<tr>
<th>DATE</th>
<th>DESCRIPTION</th>
<th>QUANT</th>
<th>UNIT</th>
<th>UNIT PRICE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of refund request</td>
<td>Reason for refund</td>
<td>4</td>
<td>6</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL**

<table>
<thead>
<tr>
<th>ACCOUNT CODE</th>
<th>COMP. TAX</th>
<th>NET AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>FUND</td>
<td>SUBJ</td>
<td>SUB</td>
</tr>
</tbody>
</table>

WSU 1279-2012-02-08

**Figure 1**
Refunds

Transaction Tracking Number (3) Enter the number assigned by the credit card company to authorize the purchase. NOTE: This number is required for refunds of web purchases.

Description (4) Indicate the reason for the refund under Description.

Reference Numbers (5) Enter the reference numbers of the original transaction documents under Description. Provide the original WSU Invoice form number and the Controller's Receipt number.

Amount of Refund (6) Enter the amount of refund requested.

Authorization (7) Each Credit Card Refund Voucher must be signed by two departmental individuals.

Prepared By Name and Signature Enter the name and signature of the individual who completes the voucher.

Approved By Name and Signature An individual with expenditure authority for the department's account signs the form. See BPPM 70.02 for an explanation of expenditure authority.

Account Code (8) Indicate the coding from the original Controller's Receipt. Check AIS Account Balances to obtain this number (see BPPM 85.33).

Department-Processed Credit Card Refunds When the voucher has been completed and approved, the department submits the refund to the credit card company.

For credit card refunds processed and submitted by the department, retain the Credit Card Refund Voucher in the department for six years (see BPPM 90.01).

See Controller-Processed Credit Card Refunds for refund transaction types that are to be processed and submitted by the Controller's Office.

Electronic Bankcard Processing For refunds processed on a swipe-transfer credit card machine, the entered refund information appears on a receipt and is recorded in the machine as part of the day's transaction totals.

The claimant signs the receipt and retains the copy. The department retains the original signed credit card refund transaction receipt.

At the close of each business day, the transactions stored in the credit card machine are totaled. This closing process transfers the net total of the day's credit card transactions to the bank.
Refunds

CREDIT CARD REFUND VOUCHER

<table>
<thead>
<tr>
<th>DEPARTMENT NAME</th>
<th>WASHINGTON STATE UNIVERSITY 365</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEPARTMENT ADDRESS</td>
<td>1</td>
</tr>
<tr>
<td>MAIL CODE</td>
<td></td>
</tr>
<tr>
<td>DEPARTMENTAL CONTACT</td>
<td>CONTACT TELEPHONE NO.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CLAIMANT</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME</td>
</tr>
<tr>
<td>ADDRESS</td>
</tr>
<tr>
<td>CITY/STATE/ZIP CODE</td>
</tr>
<tr>
<td>WSU ID NO. (WSU EMPLOYEE/STUDENT)</td>
</tr>
<tr>
<td>SOCIAL SECURITY NO. OR EMPLOYER TAX ID NO. (NON-WSU INDIVIDUAL)*</td>
</tr>
<tr>
<td>TRANSACTION TRACKING NUMBER</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DATE</th>
<th>DESCRIPTION</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL

DEPARTMENT: Please sign, date, and enter the appropriate account code.

PREPARED BY NAME | PREPARED BY SIGNATURE | DATE |
|-----------------|-----------------------|------|

APPROVED BY NAME | APPROVED BY SIGNATURE | DATE |
|-----------------|-----------------------|------|

<table>
<thead>
<tr>
<th>ACCOUNT CODE</th>
<th>COMP TAX</th>
<th>NET INVOICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>FUND</td>
<td>SUBFUND</td>
<td>PROG</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTALS

* It is unlawful for any state agency to deny any right, benefit, or privilege provided by law because an individual refuses to disclose his or her social security number except in specified circumstances. WSU is requiring that non-WSU individuals requesting payment from WSU disclose social security number or employer ID number (SSN) pursuant to Section 6109 of the Internal Revenue Code. When required, WSU will use disclosed social security numbers for IRS-reporting purposes only.

Figure 2
Refunds

Electronic Bankcard Processing (cont.)
Retain the original transaction totals tape generated by the credit card machine and the original individual sales slips for six years (see BPPM 90.01).

Retain the Credit Card Refund Voucher for six years (see BPPM 90.01).

Cash Deposit Report
Attach the copy of the day's transaction totals tape to a Cash Deposit Report. Submit the report to the Cashier's Window, Controller's Office.

Controller-Processed Credit Card Refunds
Send the Credit Card Refund Voucher to the Revenue Manager, Controller's Office, to make a credit card refund for any of the following transactions:

- Web purchases
- Tuition
- Graduate/undergraduate application fees

The Controller's Office processes the refunds with the credit card companies for these transactions.