HOW TO PROCESS CHECK REQUESTS FOR REIMBURSEMENTS OR PAYING VENDORS FOR GOODS AND SERVICES

Support group members often need to be reimbursed for out-of-pocket expenditures in connection with an event, e.g., postage and invitations, etc. Vendors must be paid for goods and services provided, e.g., catering, use of facilities such as hotels and golf courses. These expenses can be paid through the support group’s agency account.

The agency account is linked to the support group’s gift fund in The UCLA Foundation, and it is the University, through the UCLA Campus Accounts Payable Office, who issues the check directly to the individual or the vendor. The check request process begins by completing a UCLA Check Request form and attaching the itemized receipts. This form can be obtained from www.supportgroups.ucla.edu, or by calling Support Group Services at (310) 794-0324 or email smalak@support.ucla.edu. A check request form will be sent to you by email or fax. Start by reviewing the sample of a completed Check Request (see Appendices H of the Support Group Resource Manual) or the direct link provided on the home page of this site. Be sure you include the following:

1. The type of expense (e.g., if for meals, indicate breakfast, lunch, dinner, light refreshments, etc.).
2. The nature of the event or purpose of the meeting...attach the invitation.
3. The number of participants (with attached guest list to establish the relationship with the University).
4. The name of the support group.
5. Original itemized receipts (expenses of $75 or more per occasion must be supported by original itemized receipts, or acceptable electronic receipts which must be submitted with the request) and/or invoices, and a copy of the individual’s credit card statement, if paid by credit card.
6. The budget.
7. An event reconciliation that includes net proceeds/loss and explanation, if the event goes over budget.
8. The tax i.d. number for a vendor.
9. The agency account number. Each group’s number is unique. If you don’t know the number, complete as follows: Loc is 4, Account leave blank, Fund is 00282, Sub is 03, and Object is 3220.
10. An individual who is a signatory on the gift fund, and that may be either a support group officer or an authorized campus administrator, must sign the check request.
11. The preparer’s name.
Please send your completed and signed check request with attachments to the attention of your Project Manager in the UCLA Alumni Association, James West Center, Los Angeles, CA 90095, if your group is under the auspices of the UCLA Alumni Association.

If your group does not operate under the auspices of the Alumni Association, please send your completed and signed check request with attachments to Pam Franken, Record Retention and Fund Coordinator, 10889 Wilshire Blvd., 15th Floor, Los Angeles, CA 90024