The mission of the San Francisco Department of Public Health is to protect and promote the health of all San Franciscans.

We shall ~ Assess and research the health of the community ~ Develop and enforce health policy ~ Prevent disease and injury ~
~ Educate the public and train health care providers ~ Provide quality, comprehensive, culturally-proficient health services ~ Ensure equal access to all ~

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**San Francisco Department of Public Health**

**Policy & Procedure Detail***

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*All sections in table required.*

This Policy & Procedure Detail information is related to the Procurement and Accounts Payable Process Manual (attached).
Introduction
Fiscal – Procurement and Accounts Payables Non-Contracts Unit developed this Manual to provide fiscal and program staff with a comprehensive guide in understanding the procurement and payable process in accounting. This manual shares relevant procurement and payment provisions that are mainly required by the Office of Contracts Administration (OCA) and the Office of the Controller. The manual has been designed to describe the distinct characteristics of the common purchasing/payment documents and explain how the requisite provisions are followed in Fiscal in processing those documents. Integral to the internal control framework, Fiscal maintains up-to-date communication of relevant procedures to department staff.

Goals of Procurement and Accounts Payable Unit
The unit’s overall goal is to promote accurate and efficient processing of procurement and disbursement requests with the following objectives in mind.

- Perform error-free accounting
- Comply with administrative policies and procedures
- Process documents within the required timeframe
- Accomplish audits successfully
- Provide fiscal support to programs
- Build strong relationship with Programs and other stakeholders

Policies and Procedures: Procurement

Overview
Departmental purchases are generally subject to all the procurement provisions of the Charter, Administrative Code and City ordinances. This section is intended to give you a summary of key requirements involved in processing purchasing requests in fiscal.

Authorization Signature Policy

The Department of Public Health Fiscal Division keeps original authorization signature cards and maintains its database. Compliance with the signature authorization policy must be observed at all levels of management consistent with the organizational structure of the department. Delegations are approved by the Department Head downward to the next in line authority. In the absence of an individual having primary responsibility, an authorized staff may serve as an alternate approver.

A signature authorization is a delegation of authority and remains in effect until canceled or the employee leaves the department. Fiscal staff reviews the approver to ensure strict compliance to City and departmental guidelines, policies
and procedures. Staff who approves Procurement and Accounts Payable documents are accountable for the documents they approved.

Below is the step-by-step process:
1. Requestor fills out an authorization form with the Date, Employee Name, Employee Civil Service Class #, Department/Program/Unit and Address and checks the appropriate boxes for the applicable document types.

2. Authorized signatory approves/signs the authorization form then send the original form to Fiscal, 1380 Howard, room 418. The approver should have a valid authorization form on file with Fiscal.

3. Account Clerk date stamps, scans and updates the spreadsheet in the “Active” tab for a summary of the following: Division, Section, Unit, Program, Authorized Signatory, Authorized by, Effective Date, Class #, Address, Phone and checks requested document types.

4. Accounts Payable/Procurement Assistant Manager verifies the approver and hyperlink each authorization form and specimen signature to each authorized staff data.

5. When an authorized staff leaves the department, the Accounts Payable/Procurement Assistant Manager updates the spreadsheet and transfer data from “Active” to “Separated” tab.

Vendor Compliance Requirements
In order to be compliant, a vendor needs to submit these mandatory forms according to OCA. Check reference for a complete listing of the required vendor forms.

1. **Internal Revenue Service Form W-9 (Request for Taxpayer Identification Number and Certification)**. This form provides the City with the vendor’s taxpayer ID number, which is then used to assign a Vendor Number in the City’s accounting system, Financial Accounting and Management Information System (FAMIS). If a vendor has a different name in the quote or invoice, the vendor must submit a W-9 for the Controller to set up an alternate name.

2. **Treasurer/Tax Collector Form P-25 (Business Tax Declaration)**. This form is used to determine if the vendor is physically “doing business in San Francisco” and therefore is required to pay business tax. For the City to do business with a vendor, the vendor’s Business Tax Status must be
current. Some vendors must register with the Tax Collector, and some need not.

3. **Human Rights Commission Form 12B-101 (Declaration: Nondiscrimination in Contracts and Benefits)** with supporting documentation. This form is used by the City’s Human Rights Commission (HRC) to determine if the vendor has employees and offers benefits to these employees. If the vendor does, it must prove that equal benefits (health, sick leave, retirement, etc) are offered to employees with spouses and to employees with domestic partners by submitting copies of its benefit plans and personnel handbook.

When a vendor provides service or performs service within City premises, the vendor must provide a **valid certificate of insurance** documenting the specified coverage and naming the department as the certificate holder. Please see [OCA’s requirement and sample](http://mission.sfgov.org/DOCUMENT_CENTER_DOCUMENTS/DC2392.doc).

See [http://mission.sfgov.org/DOCUMENT_CENTER_DOCUMENTS/DC2392.doc](http://mission.sfgov.org/DOCUMENT_CENTER_DOCUMENTS/DC2392.doc) for instruction on how to look up vendor status information in FAMIS.

If a prospective vendor is not 12B-compliant, check if an approved sole source waiver for a specific purchase request is on file in Contracts Online (COOL). To request for waivers, contact Mark Laws at (415) 554-2839 at DPH Contracts Office. The waiver information such as amount, period and approval date should be indicated in the notepad.

Program units are responsible in making vendors comply with the above requirements since they make decisions in dealing with the vendors. On the other hand, Fiscal may provide some assistance in explaining the requirements. If a vendor has alternate names, the Requesting unit needs to submit a W-9 for vendor file update.

**City Charter Section 3.105**

The City and County of San Francisco Charter Section 3.105 states that:

*All disbursements of funds in the custody of the Treasurer must be authorized by the Controller. No officer or employee shall bind the City and County to expend money unless there is a written contract or other instrument and unless the Controller shall certify that sufficient unencumbered balances are available in the proper fund to meet the payments under such contracts or obligation as these become due.*

Certification of available funds for all purchases, contracts, and other obligations is done by posting an encumbrance transaction in the Controller’s citywide financial and accounting system, FAMIS.
After selecting a vendor in accordance with the City’s purchasing and contracting procedures, departments must encumber funds in FAMIS before issuing a purchase order, contract, or other commitment to a vendor. The encumbrance process may not be applicable under certain justifiable situations, which are discussed later in this manual.

FAMIS-Purchasing Encumbrances

Aside from Charter 3.105, Encumbrances are discussed in Administrative Code Section 10.06. When making a request for materials, supplies, equipment or general services, one of the following forms must be used:

1. For recurring order, Department Blanket Purchase Order and Release Input Form (BPO form) serves any request for recurring and repetitive type of materials or supplies and general services (e.g. courier services, refrigeration services, etc.)
2. For one-time or non-recurring order, Requisition for Materials, Supplies, Equipment and Services (Requisition form).

When processing any request, here’s a helpful guide that can be followed:

• We recommend checking the Virtual Warehouse before purchasing new items, by going to the Available Items. All items in the Virtual Warehouse are free. The Virtual Warehouse serves to implement the SF Administrative Code Chapter 21.03(i) (Disposal of Surplus) and the SF Environment Code Chapter 5 (Resource Conservation Ordinance).
• Ensure that the BPO form or Requisition form is filled out completely and approved/signed by authorized personnel. Original signature cards are maintained by Fiscal and an electronic version is at the Accounting shared drive.
• Verify if the required vendor quote is valid as to expiration date, dollar limit and negotiated terms. A valid vendor quote should be submitted on the vendor’s letterhead with vendor signature or explanation why the vendor cannot provide signature and should indicate the shipping terms. FOB destination is preferred.
• Request for services should be accompanied by the vendor’s valid Certificate of Insurance.
• Request should be approved by the designated fund accountant indicating that enough funds are available.
• Double check the accounting codes: index code, sub-object, and project code/project detail or grant code/grant detail.
• For grant-funded requisitions, the Grant procurement guideline should be identified in the FAMIS Notepad, including the funding source and the Grant Fund contact person who could answer any questions which OCA may have regarding the grant restrictions and provisions. Please note that OCA requires submitting grant checklist and grant funded documents at least 90 days prior to the expiration date.
• Verify vendor status to ensure vendor compliance requirements are met.
• Verify if vendor address on the quote is in the system.
• Check if tax computation is correct. For further guidance on California sales and use tax, see http://www.boe.ca.gov/sutax/faqpurch.htm.
• For any change order request involving increase/decrease of the purchase order amount, the proposed modification may either be accomplished on the BPO form or through an email from the Requesting unit’s authorized signatory.
• Before closing any Purchase Orders, verify that there is no outstanding order from the Requesting unit or unpaid invoices to the Vendor. The Office of Contracts Administration (OCA) requires an email from the vendor confirming such and should be indicated in the FAMIS notepad.

Depending on the nature and amount of purchasing request, the flowchart below depicts how each of the possible request scenarios is processed in accounting.
Blanket Purchase Order (BPO)
Blanket Purchase Orders (BPO) do not encumber funds. They are used to secure the approval of OCA for future anticipated purchases of certain commodities from a vendor for specific time period and dollar limit. There are two types of BPO:

1. Citywide BPOs also known as Term Contracts are negotiated by OCA to offer departments common commodities that are competitively-priced. See OCA’s link for more on term contracts.

2. Departmental BPOs are more tailored to serve the needs of a unit or group within DPH. Departmental BPOs are typically created for recurring and repetitive services and must be more than $10,000 unless a recommended vendor is a certified Local Business Enterprise, LBE. See HRC’s link for further information.

Before creating a Departmental BPO for a certain request, verify if there is an existing Citywide BPO for the same. If there is, the Citywide BPO should be utilized. Verify the effective and expiration date of the BPO. Products or services ordered should be within the BPO period.

See the Controller’s Office link on how to process or modify a BPO, http://sfcontroller.org/ftp/uploadedfiles/controller/intranet/FAMIS/BPO.pdf

Please note Fiscal accepts electronic or PDF copy of requisition form or DBPO and Input Release form in lieu of original as long as it is signed by an authorized signatory.

Releases from BPO
In all cases, before placing orders or issuing contracts, Fiscal must record an encumbrance against the BPO. This is done in FAMIS Purchasing, using a purchase order release. Prior to creating releases, the terms of the BPO such as item description and pricing should be reviewed. Click here to view OCA’s list of term contracts.

See the Controller’s Office link on how to release a PO from a BPO, http://sfcontroller.org/ftp/uploadedfiles/controller/intranet/FAMIS/DPO.pdf

Direct Purchase Order (DP)
Otherwise known as Prop Q, Delegated Departmental Purchasing Authority (DDPA) allows DPH to purchase certain goods and non-recurring general services up to $10,000 including tax and shipping without requiring approval from OCA, per Admin Code 21.04. These purchases are handled in FAMIS
purchasing by generating a Direct Purchase Order (DP). Specific to processing a DP, here are some tips that can be followed:

- Ensure the completeness and propriety of quote. OCA and DPH recommend that multiple quotes are obtained to ensure that resources are being utilized wisely.
- Review if the proper Match type (determines one-time or progress payment) and Purchasing authority are entered in the document.
- Check other requests from the Unit to ensure order splitting does not exist.

See the Controller’s Office link on how to process or modify a DPO, http://sfcontroller.org/ftp/uploadedfiles/controller/intranet/FAMIS/DPO.pdf

**Requisition and Standard Purchase Order**

Requisition (RQ) is not an actual contract but merely a request to OCA to enter into a contract for goods or services amounting to more than $10,000 for non-technology items. When a requisition is entered into FAMIS Purchasing, the RQ document pre-encumbers the funds. After OCA completes the bidding process which typically takes three to six months, a Standard Purchase Order is issued which in turn liquidates the RQ creating an encumbrance in FAMIS. Other factors that should be considered when processing this type of request are:

- OCA may process request amounting to over $10,000 and below $400,000 through informal bidding, requiring only one quote. In rare situations, OCA may require DPH to provide additional quotes to complete the request.
- RQ is also used for Computer Store and Information Technology (IT)-related transactions regardless of amount as they require an approval path in FAMIS Purchasing specific to Department of Technology (DT). Email quote to DT for approval.
- RQs are normally for single orders; but in situations when recurring/multiple orders are needed, it should be indicated in the requisition and FAMIS notepad in order for OCA to classify the POs as recurring/multiple orders.

**Novation**

According to SF Admin Code, Section 15.104, “The Director of Health is hereby authorized to apply and pay for membership of the Department of Public Health in the University Health Systems Consortium and the University Health Systems Consortium Services Corporation. The Director of Health is also authorized to enter into and execute written agreements and execute purchase orders on behalf of the City and County of San Francisco with suppliers of goods and materials selected by the University Health Systems Consortium Services Corporation through its competitive bidding process”.
Staples Advantage

- OCA creates a City-wide BPO for “Miscellaneous Office Supplies” with a dollar limit based on prior and estimated future usage.
- Each department will create a release against this City-wide BPO in the amount of their budgeted spend for the time period.
- Departments will conduct a 3-way match between (1) the order summary page printed by departmental order initiators, (2) the Priced Pack list which will arrive with the package at the time of delivery and (3) the invoice.
- Program staff who received items should verify the Priced Pack List for quantities and pricing accuracy against the order summary page. This receiver should sign or initial on the Priced Pack List. If there are any discrepancies between the order page and the Priced Pack list, program staff should contact Staples dedicated customer service directly to resolve the issue and request accurate Priced Pack list and invoices so payment can be processed. For any issues with Staples Advantage orders, below are the contact information:
  - Dedicated Customer Service for CCSF: 888-438-4804
  - Dedicated Email: CtyCntySanFran@staples.com
  - For copies of priced pack slips email: cec.email.calnorth@staples.com
- Once the Priced Pack List got verified, the authorized signatory will sign to approve for payment, and forward the Priced Pack List to Departmental Accountants who will then process a progress payment for the amount of the invoice against the previously created BPO release. The Priced Pack List should be signed by the person who received the item and then by an authorized payment (Staples Priced Pack List/Receiving Report) approver. The receiver cannot be the same person who ordered the items, approved the order or the person who approved the Priced Pack List for payment.

Policies and Procedures: Payables

Overview

Similar to the procurement process, payment for goods and services are governed by the City's Charter and Administrative Code, and the Controller’s Office instructions including the Prompt Payment Guidelines. This section demonstrates how the payment process is accomplished in compliance with those requirements.

When processing any payment requests, the following basic steps should assist in verifying accuracy and completeness of supporting documentation. Please refer to the Controller’s Payment Processing Guidelines.

- Mark an invoice with the “receive date” and write initial or name of the staff receiving the invoice.
- Match invoice to evidence of receipt of good.
Examples of supporting document include:
- Goods – packing slip
- Office supplies – priced pack list
- Service – service call documentation, work order, job order, etc.
- Copier (Konica) - meter usage log
- Document storage (GRM) – log and workorder

These supporting documents should be acknowledged by the person who received the items or service.

- Ensure that request for payment is approved/signed by an authorized personnel, while matching original signatures with the current signature card; or that the applicable payment request form is filled out completely.
- Verify vendor status to ensure vendor compliance requirements are met.
- Check if vendor payment address is accurate in the system.
- Ascertaining that invoices are original or certified-original and payment documents are complete and original.
- Check the mathematical accuracy of the form and/or supporting paperwork.
- Double check the accounting codes: index code, sub-object, and project code/project detail or grant code/grant detail.
- Observe payment due dates stipulated in the contract/invoices to adhere to contractual obligations and avail of vendor discounts. See Prompt Payment Guidelines issued by the Controller’s Office for certain mandated payment procedures.
- The detailed justification and corrective actions should be included in FAMIS notepad when required.

**Electronic Invoice**
With the Controller’s approval, DPH Fiscal accepts electronic invoices and keeps records for audit purposes. Fiscal encourages vendors to apply for such method to facilitate processing. To qualify, the vendor’s official representative should submit a letter to DPH Procurement and Accounts Payable in advance, requesting to use electronic invoice while indicating what electronic method will be utilized (email or fax). Accounting will notify the vendor when to start sending electronic invoice to 1380howardfiscal@sfdph.org.

**Electronic Payment to Vendor**
DPH encourages vendors to sign up with the Bank of America to get electronic payments or ACH (Automatic Clearing House). The Controller makes daily electronic payments and provides the same information currently printed on the checks.

See the Controller’s Office link on how to enroll in ACH Payments.

**Electronic Approval**
Due to the volume of invoices DPH receives, various program locations and prolonged time to receive back approved invoices, the Office of the Controller
approved DPH’s request for electronic approval for commodity vendors only. The approver should be have an authorized signatory card on file and the email approval should indicate the invoice number, amount, billing period, date product/service received and PO number.

FAMIS Purchasing Payments
The City uses an encumbrance method of accounting to help ensure that obligations are not incurred or expenditures made in excess of available funds, allotments, or appropriations. This method of accounting requires that certain department commitments be encumbered so that funds and/or spending authority are reserved for the future payment of goods that have not been received or for services that have not yet been rendered. In some cases where terms are provided in the purchase order, the final payment may exceed the encumbrance balance by $1,000 or 10% of the adjusted encumbrance amount whichever is less. The documents in this section are only processed in conjunction with the appropriate purchase order.

Voucher Payment (VC)
VCs are used for payment of goods and services encumbered through the procurement process via a Purchase Order, either single or progress/recurring/multiple orders.

**Single Order Payment**
Single Order Payments are non-recurring payments to vendors for work or goods satisfactorily performed or delivered.

**Progress Payment**
Progress Payments are periodic payments to vendors for work or goods satisfactorily performed or delivered within the period specified on the purchase order agreement.

The payment process requires validation of receipt of goods or services and a matching of the invoice details with the specifications on the purchase order. Vendors should charge DPH units only for services at the rates specified in its contract. In verifying a payment request, invoices should:

- Be original and approved by the authorized Program staff. The Program staff is responsible to request the Department Head or the authorized designee to certify a copy if it is used as original. Please email Faye DeGuzman, Director’s Executive Assistant for certification request with an explanation of why the original is unavailable.
- Have been verified by Program staff as to the satisfactory receipt of goods/services substantiated by a signed packing list, service confirmation, copier usage log, tracking log, or other form of
documentation. If an item is not in accordance with the PO specifications/pricing, program staff dispute the invoice with the vendor within seven (7) days and ask for a revised invoice or credit memo with the current date. Invoice Dispute Notifications by email to vendors are acceptable. The dispute should be documented and the prompt payment clock starts after dispute resolution.

- Be signed by someone other than the program staff who placed the order and who received the order. According to the Controller’s Payment Processing Guidelines, "Segregation of duties requires that different staff have responsibility for different steps in the process. Ordering, receiving, approving invoices and processing payment should not be done by the same staff person".

- Show the date of Fiscal and program’s receipt, which is a required field in FAMIS Purchasing.

- Indicate the correct purchase order number, verified by Program staff as to the validity.

- Match the respective purchase order and packing slips or service confirmation for appropriateness by both program and fiscal staff. Packing slip and service confirmation should also indicate the correct PO number and must be signed and dated (when items are received).

- Display that the date of the invoice is not prior to the date of the purchase order. Receiving goods/services prior to issuance of a purchase order is prohibited.

- Be processed timely or within 30 days upon receipt according to the Prompt Payment Guidelines.

If the PO states “NOT LIMITED TO”, provide written order confirmation or quote (please check term contract provision or purchase order specifications) to verify invoice price.

When sending approved invoice to Fiscal, attach the supporting documents (packing slip, service call documentation, job order, work order, copier meter usage, courier waybill, etc.).

If sales tax appearing on the invoice is lower than the City & County of San Francisco’s rate or out of state vendors do not include used tax at all, Fiscal submits a journal entry to account for the difference to allow proper tax remittance to the state. Program should have enough budget to post sales or use tax.

Fiscal handles vendor credit memos by offsetting such amounts with outstanding invoices for the same PO.

See the Controller’s Office link on how to process a voucher, http://sfcontroller.org/ftp/uploadedfiles/controller/intranet/FAMIS/Voucher%282%29.pdf
Direct Voucher (DV)

Direct Voucher (DV) is used only in unusual situations where funds were not encumbered first. When processing direct voucher in FAMIS Purchasing, here are items you need to consider:

- The detailed justification and corrective action plan must be included on the electronic notepad. The requestor should provide explanation to the following questions as required by OCA and Controller:
  1. If an error occurred when encumbering funds or making payments, what happened?
  2. If no error occurred, why were services or items obtained without first having a certified contract or purchase order in place, and who authorized this?
  3. Why is the price reasonable, or is it close to a price provided in a competitive process?
  4. What procedures are being implemented by the department to avoid a recurrence?
- Invoices must be original. If not, it must be certified by the Director of Public Health, Barbara Garcia or authorized designee.
- Provide signed and dated packing list, acknowledgement of service or other supporting documentation.
- Ensure that the direct payment request form is original, filled out completely and approved/signed by authorized personnel.
- Request should also be approved by the designated fund accountant indicating that enough funds are available.
- Double check the accounting codes: index code, sub-object, and project code/project detail or grant code/grant detail.
- Verify vendor status to ensure vendor compliance requirements are met.


FAMIS Accounting Payments

In contrast to FAMIS Purchasing payments, FAMIS Accounting payments are accomplished for items that are exempt from the encumbrance mandate as a matter of instructions from the Controller’s Office, nevertheless they are subject to the established budget and appropriation control.

Direct Payment to Vendor (PR/RM)

Direct payment requests are used for specific type of non-encumbered transactions that cannot be processed in FAMIS purchasing via direct vouchers.
In other words, direct payments are made to vendors without an encumbrance or purchase order. Unencumbered disbursements bypass OCA’s purchasing system and should only occur where normal purchasing procedures for goods or services are not available. Examples of DPH transactions in this category include requests for:

- External training (conferences, workshops, classroom style, etc.)
- Official advertising – note, recurring advertisements are recommended to be processed through the City’s purchasing procedure
- Membership dues approved by the Board of Supervisors per SF Administrative Code, Chapter 16, Article 1, Sec 16.6.
- Subscriptions or renewal
- Garbage and refuse liens
- Interim Assistance Reimbursement Program
- Remittances to the State of California
- Payments to other government agencies
- Miscellaneous payments such as postages, judgment/claims, other employee benefits with appropriate provision in the MOU and payments to PPN providers

Garbage and Refuse Lien

Administered by DPH Environmental Health Section (EHS) with authority from the Public Health codes, this program involves placing a lien on the properties of San Francisco residents and businesses as a result of non-payment of garbage charges.

As garbage collection vendors, Recology Sunset Scavenger Company and Recology Golden Gate Disposal & Recycling Co. refer delinquent garbage accounts to EHS, which in turn creates garbage and refuse lien list. That list containing names, addresses, delinquent garbage fees and a minimal $50 administration fee imposed by DPH is submitted to the City’s Assessor/Recorder Office for property lien processing whereby those charges are incorporated into the next property tax billing.

In order to issue checks to Recology Sunset Scavenger Company and Recology Golden Gate Disposal & Recycling Co. for the uncollected fees, Fiscal receives a request for payment from EHS, together with a Letter of Certification from the Director, a copy of the Garbage and Refuse Lien List, white copy of the original invoices issued to residents and business owners, and funding certification page showing the appropriate index code and project code/detail approved by the project fund accountant.

Interim Assistance Reimbursement Program (IARP)

Managed by the Community Behavioral Health Services-Adult System of Care, the purpose of IARP is to assist clients in obtaining placement into residential
care facilities by paying for their residential care rent charges and monthly incidental allowances while applying for entitlements such as Supplemental Security Income or State Supplemental Program with the Social Security Administration Office. IARP recovers funds from clients when they actually start receiving their retroactive benefits. Program staff should monitor from setting up the vendor to closing their file upon final payment. The fiscal process includes:

- Requesting the program coordinator to submit a letter applying for a new client account set-up, the client’s W-9 and a memo authorizing the placement.
- Asking the Placement Team to request the vendor to be compliant
- Requiring the program coordinator to submit monthly payment request forms and invoices approved by an authorized signatory to pay for the residential care rent charges and the incidental allowances.
- Updating the client’s individual file to reflect all repayments received from clients, and forwarding the repayment checks to the Cash Receipts Unit for processing.

Remittance to the State
Remittance of the State’s share in San Francisco’s revenues includes amounts from certified copies of birth and death certificate issuances, burial permits and other fees collected in accordance with California Health and Safety Code and Penal Code by the Office of Vital Records and other DPH units, which have been processed by the Cash Receipts Unit.

Depending on the type of fees, Fiscal completes the remittance on a monthly or quarterly basis upon receiving an approved Direct Payment Request form and by sending a check to the State along with required state remittance form.

Payment to Other Government Agencies
Payments to other government entities are generally made based on prevailing laws and are exempt from city’s compliance and purchasing requirements.

An example of this payment is the city’s share of expenditures incurred in the California Children’s Services (CCS) program which is mandated by federal laws as the funds pass through the state. Fiscal completes the payment upon receipt of a bill from the state agency, which is verified and approved by the Cost Reporting Unit responsible for the fiscal monitoring and financial reporting for this program. The payment package should include:

- An approved Direct Payment Request from the Cost Reporting Unit,
- State Claim Cover Sheet,
- State billing invoice, and
- SF County Quarterly Expenditure Report as supporting documentation.
Official Legal Advertising (OA)

This section pertains to official advertisement mandated by law, and other advertising required by SF Administrative Code, Chapter 2, Article IX, Section 2.8 for meetings of the Board of Supervisors and its special or standing committees.

According to the provisions of Proposition J, ten percent (10%) of the amount billed for legal advertisements placed after June 30, 1995 must be set aside for advertisements in outreach periodicals such as San Francisco Bay View, Asian Week, Small Business Exchange, Sing Tao Daily, World Journal, Bay Area Reporter, El Reportero, etc. The Controller’s Office has established an Outreach Fund where the 10% of the DPH legal advertisement costs is posted using index codes HCH2SGSFORF and HMH2SGSFORF for CHS and CBHS transactions respectively.

Request for payment of legal advertisements should include an approved Direct Payment Request Form, original invoice and a proof of publication. Payment using document type OA in FAMIS includes:

- Line 01 – Direct Expenditure to Vendor (90% of the invoice amount).
- Line 02 – Increase expenditure as advertising expense (10% of the invoice amount).
- Line 03 – Record 10% set aside as revenue in the outreach fund.

Revolving Fund Replenishment (RF)

Revolving Fund provides a payment mechanism for minor or non-recurring goods and general services that are immediate and cannot be conveniently paid by the issuance of a Controller’s check. DPH revolving funds in the amount of $44,000 have been established and approved by the Board of Supervisors through various ordinances as required by SF Administrative Code Chapter 10, Article XV, Sections 10.154 and 10.154-1.

DPH follows the provisions of the SF Administrative Code Chapter 10, Article XV, Section 10.125 through 10.131 and the Controller’s Office Guideline No. 003-008, Revolving Fund Administration Guidelines in administering the revolving funds, for the purpose of small purchases of non-recurring goods or services of $200 or less from any single vendor and reimbursements to employees for minor out-of-pocket authorized expenses less than $50.

DPH has partly used revolving funds in issuing stipend, recovery, emergency and change funds for various programs based on approved protocol. In administering a revolving fund account, Fiscal requires approval of the protocol and any changes therein. A good protocol should adhere to the following:

- Use of funds should conform to the stated purpose of the account.
• Custody of funds must be separate from the expenditure review/approval function.
• The protocol should specify the appropriate disbursement and replenishment procedures, record retention policy, and yearend and closing instructions.
• Custodian should keep the funds in a secured place.
• A reconciliation of the account should be performed on a regular basis.
• Program Administrator should report changes in protocol immediately to Fiscal Unit.
• Because of audit requirements, program should maintain adequate documentation for a good audit trail.

**Revenue Refund (RR/RD)**

Revenue Refund allows the return of fees, or amounts imposed for licenses, permits or penalties erroneously collected by the department. It is governed by the [SF Administrative Code Chapter 10, Article VI, Section 10.43](#).

Most DPH revenue refund requests originate from the Environmental Health Services (EHS). EHS collects a deposit fee from applicants prior to any inspection. At the completion of the inspection, EHS refunds any excess of the deposit received after applying the amount based on the actual hours worked and the applicable rate.

In order to process a revenue refund, Fiscal requires a duly authorized Claim for Refund form from the requesting unit signed by the Claimant, a copy of the official receipt issued by DPH, a charge slip showing the details of computation, and other related refund documents that prove actual booking of revenues. Prior to generating the actual revenue refund (RR/RD) in FAMIS, the receipt to which the refund is being made must be verified to have cleared the bank.

**One-time Payment (OT)**

One-time Payment documents allow check disbursements in FAMIS for authorized non-recurring and non-1099 reportable payments to one-time vendors. It must not be used for employee reimbursements or purchase of materials and supplies or services.

For further guidance, see the link to the [Controller’s Office Departmental Guidelines No. 004-11](#).

To request for one-time payment, Units should submit an authorized Direct Payment Request form; a memo explaining the nature and purpose of the payment, the reason for using this payment method; and a documentation evidencing the amount to be paid.
Employee Reimbursement

These reimbursements represent costs incurred by employee while conducting official business for the department. They include:

- Travel and training costs
- Local field expenses
- Professional license fees, certification fees and parking tickets as allowed by MOU provisions
- Other non-recurring work-related expenses

In FAMIS, document type TT is used when processing travel and training reimbursements, while document type TE is used for all other employee reimbursements that are not related to travel and training. In order to process reimbursement timely, employees should submit the completed original form along with original receipts and required documentation within 10 business days after travel or incurring the expenditure.

Travel and Training Reimbursement (TT)

DPH staff must adhere to Controller and DPH travel policy before a travel expense reimbursement request can be processed in the Fiscal Unit. Travel expenses will be reimbursed for employees traveling on official business that is consistent with the mission of DPH. For the complete DPH travel policy, see http://www.sfdph.org/dph/files/PoliciesProcedures/F$C1_TravelGuidelines.pdf. Refer to Controller’s instructions on Travel & Official Business Reimbursements for further guidance,

Employees should submit required documentation within 10 days after return to DPH. Prior to submitting a TT – travel and training reimbursement requests (no advance) in FAMIS, review these items for completeness and appropriateness:

- Travel must be pre-approved and supported by a Travel Authorization form.
- Request must be made in a properly approved Travel Expense Voucher.
- Original receipts should be attached to the request for each item of reimbursement to demonstrate proof of payment.
- Transportation, lodging and other related costs should be made in the most economical manner. Otherwise, an adequate justification with approval from the supervisor should be forwarded to Fiscal Unit.

Request for reimbursement of conference or training registration fees occurring within the nine bay area counties should be charged to training object 022. Any employee reimbursement request for events outside the nine bay area counties should be treated as travel expenses, chargeable to travel object 021.

When registration fees are payable directly to the vendor, expenses should be charged to training subobject 02202 regardless of the location of the training.
Local Field Expense Reimbursement (TE)
This type of employee request normally includes public transportation costs, mileage, parking fees, bridge tolls, parking meters and telephone charges.

In accordance with Section 10.28-1 of the San Francisco Administrative Code, the mileage rate for payments to officers and employees for use of privately owned automobiles in connection with any official duty or service shall be at the rate established by the Controller. Controller’s Office adopts the standard rates established by IRS for mileage reimbursement except for request funded by grants where certain rates are specifically provided. For further guidance on the Controller’s Office instruction, refer to http://sfcontroller.org/Modules/ShowDocument.aspx?documentid=2173

Fiscal should also ensure that the following information is present in the request:
• Purpose and travel routes should be adequately explained and without the use of abbreviations.
• Mileage should be reasonable and appropriately reflect the actual travel routes. Beginning and ending odometer reading should be clearly indicated.
• Field expenses should be approved by an authorized signatory.
• Work on weekends or holidays should be supported by a written approval of the immediate supervisor.
• Meetings outside San Francisco should be supported by agenda and/or email invitation.
• Parking within city limits can be reimbursed with an explanation why public transportation could not be used.

If an employee is requesting solely for mileage reimbursement, the FAMIS document should use the subobject 02301-auto mileage. However, if the request includes other expenses, the subobject 02302-local field expenses should be used.

Professional License Fee, Certification Fee and Parking Tickets (TE)
Employees may request reimbursement for these items provided that the current Collective Bargaining Agreement (CBA) between the City and the employee’s Labor Union stipulates such provisions. Payment request for license fees typically includes:

• Professional License Reimbursement Request Form approved by the HR manager or designee,
• Copy of the license/certification application or renewal form,
• Copy of the newly issued license or certificate,
• Proof of payment such as official receipt, cleared check or copy of the credit card statement, and
• A copy of the CBA provision.
Other Non-recurring Work Related Expense
Employees may also seek for reimbursement of minor non-recurring purchases up to $200 from any single vendor provided that such expense is approved in advance by authorized personnel. Required attachments to the payment request are: original official receipt, a memo addressed to the Accounts Payable Unit Head showing the purchase date, description of expense, business need and purpose. Fiscal will deny any request without a prior approval including items that should have gone through the normal procurement procedures.

Payment to Other Department

Parking Tickets and Transit Passes
According to DPH Policy, “When on official City business, DPH staff may park City-owned vehicles or their privately-owned vehicles in metered spaces without paying the meter fee when using a parking permit. Alternatively, employees may be provided with pre-paid parking cards to pay the parking meter”.

Upon ordering from Municipal Transportation Agency (MTA), program staff should provide parking permit application to Accounts Payable to support payments to MTA.

Program staff may order clipper cards, MUNI passes or tokens for official City business use or patient incentives. Every month, each program submits requisition form approved by an authorized signatory. The form should have the complete information including the purpose or specific staff using the transit pass.

Programs should comply with the following Internal Control requirements:

1. Expenditures must meet Program requirements;
2. Expenditures must meet eligibility requirements;
3. Requested items must be kept in secure place;
4. Program must maintain logbook of how these items are distributed or used;
5. Program must keep records and supporting documents onsite for 5 years and maybe subject to audit.

Approval and Timelines
Fiscal – Procurement and Payables Unit ensures timely processing of documents. Its goal is to initiate documents in FAMIS within 5 business days of receipt unless there is a pending issue and to approve them within 5 business days after input in FAMIS. Some documents go to the Department of Technology, Office of Contract Administration and the Controller for final
approval. To comply with Internal Control’s segregation of duties, the document initiator should not approve own documents.

Safety Vault
Valuable and sensitive documents and accounting records are kept in a safety vault with limited access to assigned staff and a back-up. Safe combination is changed every two years or when there is change in staff, whichever is first.

Incoming Documents
An assigned Account Clerk sorts and distributes incoming documents. All incoming documents are stamped with receipt date to assist in tracking compliance with the Controller’s Prompt Payment Guidelines. Depending on the document types, some are scanned and some are not.

Record Retention and Destruction Policy
Procurement and Accounts Payable documents are filed systematically for easy access and later audits. DPH Record Retention and Destruction Policy has been adopted pursuant to Chapter 8 of the San Francisco Administrative Code, which requires each department head to maintain records and create a records retention and destruction schedule.

The goals of this policy are to retain important documents for reference and future use, to delete documents that are no longer necessary, organize important documents for efficient retrieval, and ensure that employees know what documents should be retained and the length of their retention.

Please refer to DPH link regarding records management policy that applies to Fiscal Purchasing and Accounts Payable units.
Appendix Section

Appendix A: Forms
Forms in this appendix are for the purpose of showing images but the latest version can be retrieved using this web link http://dphnet/Documents.

- Authorization
- Departmental Blanket Purchase Order and Release
- Requisition for Materials, Supplies, Equipment and Services
- Direct Payment Request
- Claim for Refund Request
- Travel/Training Authorization
- Travel Expense Voucher
- Field Expense Report
- Checklist for Grant Funded Requisitions and Contracts
- Department CIO Review Technology Request
City & County of San Francisco
Public Health - Population Health and Prevention

AUTHORIZATION

Date: ______________________________________

Printed Name: (LAST NAME, FIRST NAME) ____________________________

CS Class # _________________________________________________________

Signature

Department/Program/Unit

Address: ____________________________ Phone #: ______________________

☐ DP  ☐ DBPO  ☐ PO  ☐ PR

☐ Invoices  ☐ Field Expense  ☐ Travel  ☐ Petty Cash

☐ Staples Priced Pack List/Receiving Report  ☐ Other-Pls. Specify:

DP = Direct Payment/Direct Voucher
DBPO = Departmental Blanket Purchase Order
PO = Purchase Order
PR = Purchase Requisition of Materials & Supplies

Note:
- Staff who act as buyer for your program should not be designated as authorized signatories on Purchase Requisition.

I do hereby authorize the person whose signature appears above, to sign or approve, in my name, documents mentioned above, for this department/program/unit.

Printed Name / Signature of Person Authorizing

(Do not write below this line.)

Date Cancelled

**

1. GREG WAGNER Central Admin
2. ROLAND PICKENS SF Health Network
3. TOMAS ARAGON Population Health

Note: This form supersedes previous authorization forms.
**ADPICS/FAMIS - FY**

**INSTRUCTIONS:**
1. Complete box #1 or #2
2. Complete all other unshaded items

**DEPARTMENTAL BLANKET PURCHASE ORDER AND RELEASE INPUT FORM**

**DEPARTMENTAL BLANKET PURCHASE ORDER (DBPO)**
- **TOTAL ESTIMATED AMOUNT FOR PERIOD COVERED:** $______________
- **RELEASE ENCUMBRANCE AMOUNT:** $______________  (MUST EQUAL SUM OF ACCOUNTING LINES)

**Complete for Non-Term Contract TPA-type purchases**
- **TERM CONTRACT # TO RELEASE AGAINST CITY TERM CONTRACT:**
- **RELEASE ENCUMBRANCE AMOUNT:** $______________  (MUST EQUAL SUM OF ACCOUNTING LINES)

**Complete for Term Contract TPA-type purchases**
- **VENDOR:**
- **VENDOR #  _______________________   Sfx;_______
  DELIVER TO: SEND INVOICES IN DUPLICATE TO:
- **ADDRESS**
- **FEIN/SSN No. ______________________________
  Phone # ___________________________________

**TERMS OF PAYMENT FOB POINT CENTRAL DEPARTMENT USE**

**COMMODITY OR SERVICE CODE #**
- **DETAILED DESCRIPTION OF PRODUCT OR SERVICES**
  (REQUIRED WHEN BOX #1 IS CHECKED)

**STAFF AUTHORIZED TO RELEASE AGAINST THIS BLANKET**
(For on-line Departments use only)

**ATTACHMENTS** - Please identify by title or description

**APPROVED BY**
- **CHIEF ADMINISTRATIVE OFFICER**
- **BOARD OR COMMISSION**

**Line Document Number**
- **Project**
- **Grant**

**ADDENDUM ATTACHED**

**Nos. of Pages ______**
### Requisitions for Materials, Supplies, Equipments & Services

**Division:**

Prepared by: __________________________ Telephone #: __________________________

Quoted by: __________________________ Telephone #: __________________________

**VENDOR**

**INDEX CODE:**

**SUB OBJECT:**

- Project Code: __________________________
- Phase: __________________________
- Grant Code: __________________________
- Detail: __________________________
- Vendor Code: __________________________
- Vendor No.: __________________________

**DELIVER TO**

Remittance Code: __________________________
Purchasing Authority: __________________________
Vendor Status: __________________________

### Item Details

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Quantity</th>
<th>Price</th>
<th>Commodity Code</th>
<th>Description</th>
<th>Amount</th>
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**Gross Amount**

**Other**

**Freight/War.**

**At 11% Sales Tax**

**Invoice Total**

### Remarks

(Any Special Requirements, Reference to Attached Forms or Samples, Previous P.O. #, or DPO #, etc.)

**Unit/Section Head Approval** (Print Name & Sign)

_______________________________

Public Health - PHP Purchasing

**FOR INTERNAL USE ONLY**

Division Head Approval (Print Name & Sign)

_______________________________

Fiscal Head Approval

_______________________________

One-time purchase

Recurring purchases

Revised January 2014
## Direct Payment Request Form

**To:** 

**Address:**

**Invoice Date**

**Date Received**

**Due Date**

**COMMODITY OR SERVICE CODE #**

**Description:**

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**PREPARED BY** (Print Name and Sign)

**APPROVED BY** (Print Name & Sign)

**DEPT. HEAD/BOARD OR COMMISSION PURCHASER**

**CHIEF ADMINISTRATION OFFICER**

**CONTROLLER**

**MATERIALS, SUPPLIES & SERVICES**

---

**NOS. OF PAGES**
CLAIM FOR REFUND
Claimant makes this claim for refund of money paid the City and County of San Francisco.

1. Claimant's name: ____________________________

2. Claimant's address: ____________________________

3. Site address: ____________________________

4. To whom payment was made:
   (Give name of Department, if possible, attach copy of your receipt)

5. Purpose of payment: Describe generally (Example: Building Permit)
   a. ( ) For a permit ____________________________
   b. ( ) For a license ____________________________
   c. ( ) As a cost ____________________________
   d. ( ) As a penalty ____________________________

6. Amount Paid: ________________ Date Paid ________________ Check #: ________________ Receipt #: ________________

Refund Requested: ____________________________

7. Refund is requested for the following reason:
   a. ( ) Duplicate payment
   b. ( ) Payment in excess of amount due
   c. ( ) Payment erroneously collected by reason of City clerical error
   d. ( ) Penalty payment collected by Central Permit Bureau and refunded in amount by action of the Board of Permit Appeals
   e. ( ) Permit issued by Central Permit Bureau as provided in BUILDING CODE and NO WORK HAS BEEN DONE: Project has been abandoned due to cause beyond permittee's control.
   f. ( ) Permit issued by Central Permit Bureau as provided in BUILDING CODE and permit has been cancelled or denied by a department, board or commission having jurisdiction.

8. Describe any other facts surrounding your transaction and request for refund so as to permit an understanding of the merits of your claim

(attach additional sheet if necessary)

This claim should be filed within SIX MONTHS after the last item of the account or claim accrued, with the head of the department, board or commission originally receiving the money and the amount claimed is justly due.

I DECLARE (OR AFFIRM) UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

(Signature over printed name) ____________________________

Place of Execution ____________________________
   (City, County, State where executed)

Date of Execution ____________________________
   (If signed by another, state relationship, name, address)

Form NOT to be used for refund of property taxes, real estate taxes, improvement taxes, personal property taxes, special assessment district taxes.

To: Controller's Office, Room 300 City Hall, 1 Dr. Carlton B. Goodlett Place, San Francisco, California 94102

I certify that the claim made above is legally allowable and recommended a refund of $ ________________
under authority of SF Administrative Code 10-43

Signed ____________________________
   (Department Head or designee)

Department: ____________________________

Date: ____________________________
### CITY AND COUNTY OF SAN FRANCISCO
### DEPARTMENT OF PUBLIC HEALTH
### TRAVEL / TRAINING AUTHORIZATION

**From:**
Print Name: 
Civil Service Class: 
Work address: (Please include room#)

**Date of Request:**

**Through:**
Immediate Supervisor (print name and sign) Date (All)*

**Through:**
Manager (print name and sign) Date Expense)*

**Through:**
Division/Deputy Director Date Expense)*

To:
Barbara Garcia - Director of Health Date Expense >$500)*

**Budget Codes:**
Index Code
Fd Type/Fd/Sub Fd
Sub Object
Grant/Proj Code
Detail

**Date/s of travel:**

**Accounting Signature**

**Travel to:**

**Meeting/Conference Name:**

**Benefits to you and the Department:**

**How will this conference impact Community?**

I will provide a full report to my supervisor, and complete a travel expense voucher within 10 days of my return.

**Requested by:**
[Signature] 
[Telephone No.] 
[Date]

**AIRLINE**
AIRLINE Date From (City) To (City) Sub-total

**CAR RENTAL COMPANY**
City No of Days Rate Sub-Total

**HOTEL/ACCOMMODATIONS**
City No of Days Daily Rate Sub-Total

**PER DIEM / MEALS**

NOT REIMBURSABLE

**OTHERS**
(Conference/registration fee, local transportation, etc./amount) Sub-Total

**GRAND TOTAL $**

---

### Check as applicable

*1 IN STATE; ___ In County; ___ Out of County; ___ No expenses other than salary or Field Expense.

Only required signature is that of Immediate Supervisor, who shall retain this form.

*2 IN STATE; ___ Greater than $500. Submit this form to Accounting.

*3 IN STATE; ___ In County; ___ Less than $500. Submit this form to Accounting.

*4 OUT OF STATE; ___ Out of County; ___ Less than $500; ___ Greater than $500. Submit this form to Accounting.

---

### PLEASE CHECK TRAVEL AGENCY BEING USED:

- Airport Travel Agency  
  Tel: (650) 877-0422; Fax: (650) 877-0285

- Clement Travel Services, Inc.  
  Tel: (415) 386-2535; Fax: (415) 386-2580

- Orientex Travel, Inc.  
  Tel: (415) 788-1711; Fax: (415) 398-0465

Revised: January 2014
CITY AND COUNTY OF SAN FRANCISCO
TRAVEL EXPENSE VOUCHER
TRANSMIT ORIGINAL COPY TO CONTROLLER (WITH REQUIRED RECEIPTS ATTACHED)

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<th>DEPT:</th>
<th>DATE:</th>
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<tr>
<td>DIVISION:</td>
<td>TRIP TO:</td>
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<td>PURPOSE:</td>
<td>TRIP DATE:</td>
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<th>DATE</th>
<th>DESCRIPTION</th>
<th>REGISTRATION FEE</th>
<th>HOTEL</th>
<th>AIRFARE/AUTO</th>
<th>MEALS</th>
<th>OTHERS</th>
<th>TOTAL</th>
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<th>AMOUNT DUE</th>
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CERTIFICATION is hereby made that expenditures claimed hereon are true and correct, and were incurred according to law and in connection with official business of the City and County of San Francisco.

DEPT. HEAD APPROVAL: EMPLOYEE SIGNATURE:

Print Dept. Head Name: Print Employee Name:

COMPLETE SECTION BELOW FOR DEPARTMENT ACCOUNTING INFORMATION:

INDEX CODE: SUBOBJECT: PROJECT OR GRANT: PRJ OR GRNT DTL: LEGALITY VERIFIED: ORDINANCE NO. RESOLUTION NO. APPROVED FOR AUTHORITY:
### FIELD EXPENSE REPORT

**Dept:**  
**Date:** ________________

Reimbursement is requested for field expense on official business for month of: ________________

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<th>DATE</th>
<th>PURPOSE</th>
<th>TRAVEL (From-To)</th>
<th>RT Y/N</th>
<th>ODOMETER READINGS</th>
<th>MILES</th>
<th>PARKING METER</th>
<th>CARFARE</th>
<th>TELEPHONE</th>
<th>OTHER (Receipt Required)</th>
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</table>

**Subtotal Parking Meter, Carfare, Telephone & Other**  
$            -  $            -  $            -  $            -

**Total of last four columns above**  
$            -

**Make and Model Car**  
**License Number**  
**Total Miles**  
**Rate Per Mile**  
**$0.500**  

**THE UNDERSIGNED HEREBY CERTIFIES** that the above is a true statement of travel mileage and expense incurred in official business of the City and County of San Francisco.

**GRAND TOTAL**  
$            -

**Manager/Immediate Supervisor (signature over printed name)**

**Employee's Signature**

**Expense incurred by (print name of employee)**

**Civil Svc class no:**

**Phone#:**

**Clinic/Unit:**

**INDEX CODE:**

**Work Address:**

**SUBOBJECT:**

---

**31**
Checklist for Grant Funded Requisitions and Contracts

Instructions: All City Departments are required to submit a completed checklist for all grant funded requisitions and contracts. Attach this completed form and the supporting documents for grant funded requisitions and contracts and submit via email to: dem_grants@sfgov.org

1. ☐ Project/Requisition Summary (please limit to 3-5 sentences):

2. ☐ Requisition/Blanket #: 

3. ☐ Enter ECD coding in the department field of the 2100 requisition header screen (ECDFR for the Fire Department, for example)

4. ☐ Grant code and grant code detail is entered in the accounting line of the requisition (Not applicable for blankets)

5. ☐ For technology related requisitions, change the doc type to RT on the 2100 requisition header screen and submit for DT CIO review. For both requisitions or blankets include the transaction number in the message line of the email, attach supporting documents, include a brief summary of your request and send to following email address: CIO.Review@sfgov.org

6. ☐ Name of Grant:

7. ☐ Type of grant (Federal, State, Local or Private): Choose an item.

8. ☐ Federal catalog or CFDA number:

9. ☐ Grant Year: Choose an item.

10. ☐ Grant/Project expiration date: Click here to enter a date.

Please note: Grant funded requisitions and contracts must be submitted to OCA a minimum of 90 days prior to the grant expiration date. For complex projects and vehicle purchases, it is recommended to submit requests at least 6 months prior to the grant expiration date. Any requests submitted less than 90 days prior to the grant expiration date may result in the loss of the grant funding due to inadequate time for processing.

11. ☐ For multiple grant funding sources complete Attachment 1 – Multiple Grant Worksheet

12. ☐ AEL (Authorized Equipment List Number):

13. ☐ MOU (Memoranda of Understanding) or LOA (Letter of Agreement)

14. ☐ Performance Bond. Departments MUST obtain a Performance Bond for any equipment item over $250,000 or any vehicle, aircraft or watercraft, financed with homeland security dollars.

15. ☐ Grant guidance or grant procurement guidelines electronically attached or web address provided. Web address:

16. ☐ Grant terms and conditions, forms or attachments to be included in the bid solicitation. Please include details below.

a. 

b.

c.

17. ☐ Vendor’s quotation or pricing proposal attached

18. ☐ Is this a sole source? If yes, please attach the following:

a. Approval of sole source contract by the granting agency (This may not be required if the cumulative amount of the project will not exceed $100,000 within the specific grant and grant period)

b. HRC sole source waiver
c. OCA sole source waiver
d. Departmental justification memo

19. ☐ Financial Management Workbook
Attachment 1 - Multiple Grant Worksheet

Instructions: All City Departments are required to submit Attachment 1 - Multiple Grant Worksheet for all grant funded that utilize multiple grant funding sources. Please note: For procurement and auditing purposes, the combined requirements for all grants that are combined into multiple grant funding sources will apply to the procurement and any resulting contract. Departments are advised that this may result in complications in the procurement process and fulfillment of the grant requirements by the department.

<table>
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<tr>
<th>Grant #2</th>
<th>Grant #3</th>
<th>Grant #4</th>
<th>General Funds</th>
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<tr>
<td>1. Name of Grant:</td>
<td>1. Name of Grant:</td>
<td>1. Name of Grant:</td>
<td>1. Total amount of general funds:</td>
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<td>2. Type of grant (Federal, State, Local or Private): Choose an item.</td>
<td>2. Type of grant (Federal, State, Local or Private): Choose an item.</td>
<td>2. Type of grant (Federal, State, Local or Private): Choose an item.</td>
<td>2. Index code:</td>
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<td>3. Federal catalog or CFDA number:</td>
<td>3. Federal catalog or CFDA number:</td>
<td>3. Sub-object code:</td>
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<tr>
<td>4. Grant Year: Choose an item.</td>
<td>4. Grant Year: Choose an item.</td>
<td>4. Grant Year: Choose an item.</td>
<td>4. Project code (if applicable):</td>
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<td>5. Grant/Project expiration date: Click here to enter a date.</td>
<td>5. Grant/Project expiration date: Click here to enter a date.</td>
<td>5. Grant/Project expiration date: Click here to enter a date.</td>
<td>5. Project code detail (if applicable):</td>
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</table>
Department CIO Review Technology Request

Complete this form and forward to the CIO Review@sfgov.org.

Department: __________________________ Date Submitted __________________________
Requisition: ____________
Blanket PO: ____________
Requestor: __________________________ Telephone #: (415) ___ - ___

Describe in detail the Equipment/Software/Services to be purchased:

__________________________________________________________________________

Detail the intended use of the equipment/software/services described above:

__________________________________________________________________________

Specify the intended use: [ ] New Service/Activity [ ] Enhancement [ ] Replacement
[ ] Support/Maintenance [ ] Existing System

Is this a CIO approved project? [ ] Yes [ ] No

Is this request a component of an ongoing project?
[ ] Yes, identify the project [ ] No

Estimated cost of the equipment/software/services described above: $_________

Request Information for Funding: Index Code: _____ Project Code: ______

Department Head Signature: _____________________________________________

Finance Contracts [ ] Approved [ ] Not Approved

_________________________________________

Department of Technology/CIO Date: __________________________

[ ] Approved [ ] Not Approved

_________________________________________

Department Head Date: __________________________
Appendix B: Checklists

Fiscal developed a series of checklists for selected accounting documents to guide requesting units in completing the forms and submitting the required information. Checklists in this appendix are for the purpose of showing images but the latest versions can be retrieved using this web link http://dphnet/Documents by searching the form or checklist name. Each form has a checklist on a separate tab of the Excel file.

- Vendor Compliance
- Term Contract or Citywide Blanket Purchase Order Release
- Departmental Blanket Purchase Order and Release
- Requisition for Materials, Supplies, Equipment and Services
- Direct Purchase Order
- Staples Advantage
- Invoice Payment
- Direct Voucher
- Direct Payment Request – Vendor Payment
- Claim for Refund Request
- Direct Payment Request – Employee Reimbursement
- Travel/Training Authorization
- Travel Expense Voucher
- Field Expense Report

<table>
<thead>
<tr>
<th>VENDOR COMPLIANCE CHECKLIST</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. VALID BUSINESS TAX CERTIFICATE OR NO SF PRESENCE (Per FAMIS screen 9560)</td>
</tr>
<tr>
<td>2. HBC &amp; HBN - &quot;YES COMPLIES&quot; per FAMIS screen 9560</td>
</tr>
<tr>
<td>3. IF VENDOR IS NON-COMPLIANT, APPROVED SOLE SOURCE WAIVER (per COOL-Contracts on Line)</td>
</tr>
<tr>
<td>4. VALID INSURANCE CERTIFICATE (for services) ON FILE WITH FISCAL</td>
</tr>
</tbody>
</table>

IMPORTANT REMINDERS
Please check if the vendor information is set up in FAMIS. If not, refer to the mandatory forms per OCA website http://sfgsa.org/index.aspx?page=4762
For sole source waiver, please contact Mark Laws @ 554-2839
TERM CONTRACT OR CITYWIDE BLANKET PURCHASE ORDER RELEASE CHECKLIST
A term contract is a contract bid by the Office of Contracts Administration (OCA) and used by one or more City departments. The term contract allows the department to order as much of the commodity or service as it wants, whenever it wants, limited only by the term contract’s duration and dollar limit.

- All required fields filled out
- Approved/signed by the ordering unit’s authorized signatory
- Certified/signed by the designated Fund Accountant.
- Verified accounting codes: index code, sub-object, and project code/detail or grant code/detail.
- Indicated the BPO number or indicated this is a release from Citywide BPO
- Indicate if one-time or recurring order

IMPORTANT REMINDERS
PDF copy of complete documents email to DPH-1380 Howard Fiscal/DPH/SFGOV is acceptable.
If your program has an account number with the vendor, please include it.

DEPARTMENTAL BLANKET PURCHASE ORDER (DBPO AND PO RELEASE)
DBPO is a non-encumbrance request of more than $10,000 to secure approval from Office Contracts & Administration (OCA) for future anticipated purchases of certain commodities from a vendor that are recurring in nature for specific time period and dollar amount. Before requesting a DBPO, verify if there is a Citywide BPO or term contract.

A RELEASE is used to request an encumbrance against DBPO.

1. CHECK VENDOR COMPLIANCE (Refer to Vendor Compliance Checklist)

2. COMPLETED DEPARTMENTAL BLANKET PURCHASE ORDER AND RELEASE INPUT FORM
- All required fields filled out
- Approved/signed by the ordering unit’s authorized signatory
- Certified/signed by the designated Fund Accountant.
- Verified accounting codes: index code, sub-object, and project code/detail or grant code/detail.

3. VALID QUOTE FROM THE VENDOR
- Quote’s term (beginning and end date)
- Quote submitted on vendor's letterhead
- Vendor's signature on the quote or a printout of the email/fax confirmation from the vendor with the quote as attachment
- Indicate if there are taxable and non-taxable items (if applicable)
- FOB destination is preferred
- Shipping/freight, if justifiable, should be indicated
- Indicate whether the freight charges are taxable or not

4. FOR KONICA CONTRACTS, attach properly filled out CopySmart form

IMPORTANT REMINDERS
PDF copy of complete documents email to DPH-1380 Howard Fiscal/DPH/SFGOV is acceptable.
Fiscal combines program request if more than $10K to set up a blanket.
OCA will not accept departmental blankets below $10K unless the vendor is an LBE-Local Business Enterprise.
If your program has an account number with the vendor, please include it.
REQUISITION (RQ) FOR MATERIALS, SUPPLIES, EQUIPMENT & SERVICES

RQ is used to procure materials, supplies, equipment, and general services non-recurring in nature. This form is also used for computer stores and IT related transactions regardless of amount.

1. CHECK VENDOR COMPLIANCE (Refer to Vendor Compliance Checklist)

2. COMPLETED REQUISITION FORM
   - All required fields filled out completely, with adequate and plain descriptions of each items requested
   - Ordered by a program staff (other than the approver and receiver)
   - Approved/signed by the ordering unit's authorized signatory
   - Certified/signed by the designated Fund Accountant
   - Verified accounting codes: index code, sub-object, and project code/detail or grant code/detail
   - Indicated if one-time or recurring purchases

3. VALID QUOTE FROM THE RECOMMENDED VENDOR (Standard Requisition Only)
   - Quote's expiration date has not ended
   - Quote submitted on vendor's letterhead
   - Vendor's signature on the quote or a printout of the email/fax confirmation from the vendor with the quote as attachment
   - Indicate if there are taxable and non-taxable items (if applicable)
   - FOB destination is preferred
   - Indicate shipping/freight, if any
   - Indicate if freight & handling charges are taxable or non-taxable items

4. VALID QUOTE FROM THE RECOMMENDED VENDOR - (IT Related Requisition)
   - Quote will not end within 3 weeks of Fiscal received date
   - Quote submitted on Technology Store Form and signed by the vendor
   - Quote approved by DPH IT staff or Department of Technology
   - If item is $10K or over, OCA may conduct either informal or formal bidding depending on the dollar amount of the requisition and complete the process of PO generation
   - Indicate if there are taxable and non-taxable items (if applicable)
   - FOB destination is preferred
   - Indicate shipping/freight, if any
   - Indicate whether the freight charges are taxable or not

5. Department CIO Review Technology Request (IT Related Requisition)

6. SIGNED OR STATEMENT OF WORK, IF FOR SERVICE

7. CIVIL SERVICE APPROVAL BY LOCAL 21, IF FOR SERVICE

8. GRANT CHECKLIST, IF GRANT FUNDED

IMPORTANT REMINDER
PDF copy of complete documents email to DPH-1380 Howard Fiscal/DPH/SFGOV is acceptable.
# DIRECT PURCHASE ORDER (DPO-PROP Q) REQUEST CHECKLIST

> Otherwise known as Prop Q, Delegated Departmental Purchasing Authority (DDPA) allows departments to purchase goods and non-recurring general services up to $10,000 including tax and shipping without approval from the Office of Contracts Administration (OCA). DPO is used to encumber or set aside funds. Order splitting is prohibited to stay below the $10,000 limit.

<table>
<thead>
<tr>
<th>1. CHECK VENDOR COMPLIANCE (Refer to Vendor Compliance Checklist)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. COMPLETED DEPARTMENTAL BLANKET PURCHASE ORDER AND RELEASE INPUT FORM (PROGRESS PO) or REQUISITION FOR MATERIALS, SUPPLIES, EQUIPMENT AND SERVICES FORM (ONE-TIME PO)</td>
</tr>
<tr>
<td>- All required fields filled out</td>
</tr>
<tr>
<td>- Approved/signed by the ordering unit's authorized signatory</td>
</tr>
<tr>
<td>- Certified/signed by the designated Fund Accountant</td>
</tr>
<tr>
<td>- Verified accounting codes: index code, sub-object, and project code/detail or grant code/detail</td>
</tr>
<tr>
<td>3. VALID QUOTE FROM VENDOR</td>
</tr>
<tr>
<td>- Quote's expiration date has not ended</td>
</tr>
<tr>
<td>- Quote submitted on vendor's letterhead</td>
</tr>
<tr>
<td>- Invoice attached</td>
</tr>
<tr>
<td>- Valid quote from vendor on invoice or a printout of the email/fax confirmation from the vendor with the quote as attachment</td>
</tr>
<tr>
<td>- Indicate if there are taxable and non-taxable items (if applicable)</td>
</tr>
<tr>
<td>- FOB destination is preferred</td>
</tr>
<tr>
<td>- Shipping/freight, if justifiable, should be indicated</td>
</tr>
<tr>
<td>- Indicate whether the freight charges are taxable or not</td>
</tr>
<tr>
<td>- OCA and DPH recommend obtaining multiple quotes to ensure wise use of resources</td>
</tr>
</tbody>
</table>

**IMPORTANT REMINDER**

PDF copy of complete documents email to DPH-1380 Howard Fiscal/DPH/SFGOV is acceptable.

If your program has an account number with the vendor, please include it.
Staples Advantage Encumbrance, Ordering & Payment

**Office of Contract Administration**
- Sets up Blanket Purchase Order in FAMIS Purchasing (ADPICS) for "Miscellaneous Office Supplies from Staples"
- Monitors Staples’ pricing, invoicing and order fulfillment on a monthly or quarterly basis

**Ordering Department**
- Authorized user places order online using Staples portal, and prints Order Page for authorized signatory to approve and sign
- Forwards the original Order Page to Dept. Accounting for approval
- A different person other than the ordering user and authorized signatory receives delivery and verifies goods on Priced Pack List with Order Page, and sign or initial as “the receiver”
- Authorized signatory of Staples Priced Pack List signs it to approve
- Forwards the authorized original Priced Pack List to Dept. Accounting

**Department Accounting**
- Creates PO release against OCA’s BPO for anticipated spend on office supplies
- Receives approved Order Page from the Program and approves order using Staples portal
- Receives original invoice from Staples
- Receives signed and approved Priced Pack List from Program authorized signatory/Approver
- Performs matching of quantity and amount of each invoice with the order page and Priced Pack List
- Keys the invoice into FAMIS Purchasing and creates a voucher

**Controller’s Office**
- FAMIS Accounting produces electronic payments to Staples
## INVOICE PAYMENT CHECKLIST

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>1.</td>
<td>CHECK VENDOR COMPLIANCE (Refer to Vendor Compliance Checklist)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 2. | INVOICE  
- Mark with received date (Program and Fiscal)  
- Write initial or name of the person receiving the invoice  
- Should be original  
- A copy is acceptable **ONLY** if it is certified as original by the Department Head  
- Electronic invoice is acceptable **ONLY** if the vendor is pre-approved by Fiscal  
- Approved/signed and dated by the ordering unit's authorized signatory. Approval thru email is acceptable.  
- Verified sales tax calculation using the rate applicable to San Francisco County |
|   |   |
| 3. | PACKING LIST OR SERVICE CONFIRMATION  
- Date stamped  
- Signed and acknowledged by the receiver other than the person who placed and approved the order |
|   |   |
| 4. | THREE-WAY MATCH  
- Invoice (1), packing list or service confirmation (2) and PO specification or order confirmation (3) should match |
|   |   |
| 5. | VALID PURCHASE ORDER NUMBER  
- Indicate valid PO # on the invoice and should match with the evidence of receipt of item or service.  
  (If no valid PO number, invoice will be returned) |

## IMPORTANT REMINDERS
- Purchase Order should be set up or funds encumbered before processing payments.
- Check Blanket PO expiration, if release from a blanket.
- Program should have enough budget for sales tax not included on the invoice.
DIRECT VOUCHER (DV) REQUEST CHECKLIST

DV is used only in unusual situations where funds were not encumbered first or relevant PO was closed. It should not be used for recurring purchases.

Please note that Direct Payment Request form is used for Direct Voucher payment.

1. CHECK VENDOR COMPLIANCE (Refer to Vendor Compliance Checklist)

2. ORIGINAL COMPLETED DIRECT PAYMENT REQUEST FORM
   - All required fields should be filled out completely
   - Approved and signed by the ordering unit’s authorized signatory
   - Certified/signed by the designated Fund Accountant.
   - Verified accounting codes: index code, sub-object, and project code/detail or grant code/detail

3. INVOICE
   - Mark with received date (Program and Fiscal)
   - Write initial or name of the person receiving the invoice
   - Should be original
   - A copy is acceptable ONLY if it is certified as original by the Department Head
   - Electronic invoice is acceptable ONLY if the vendor is pre-approved by Fiscal
   - Approved/signed and dated by the ordering unit’s authorized signatory

4. PACKING LIST OR SERVICE CONFIRMATION
   - Date stamped
   - Signed and acknowledged by the receiver other than the person who placed and approved the order

5. WRITTEN DETAILED JUSTIFICATION (Required by OCA-Office of Contracts Administration and Controller)
   - If an error occurred when encumbering funds or making payments, what happened?
   - If no error occurred, why were services or items obtained without first having a certified contract or purchase order in place, and who authorized this?
   - Why is the price reasonable, or is it close to a price provided in a competitive process?
   - What procedures are being implemented by the department to avoid a recurrence?

IMPORTANT REMINDERS

DV amount that exceeds $1,000 is subject to review by OCA and Controller.
Transactions that are not justified (to the satisfaction of OCA or Controller) will be returned.
Provide other supporting documents such as quote/s, expired PO, etc.
### DIRECT PAYMENT REQUEST (DPR) CHECKLIST

DPR is used for requesting payment of the following: conference registration fees, training fees, non-recurring advertisements, legal advertisements, interim assistance reimbursement program (SSI) payments, subscription renewal, and membership fees approved by the Board of Supervisor, payment to government agencies, revolving fund replenishments and all other payments that do not normally go through the procurement procedures.

Submit original and completed DPR form duly approved by an authorized signatory with appropriate attachments.

1. **CHECK VENDOR COMPLIANCE** (Refer to Vendor Compliance Checklist)

#### Attachments for conference registration fees and training fees:

- 2. **COPY OF TRAVEL/TRAINING AUTHORIZATION FORM** (pre-approved and completed prior to the travel date)

- 3. **ORIGINAL INVOICE** or **COPY OF FULLY ACCOMPLISHED REGISTRATION FORM**

- 4. **CONFERENCE/TRAINING INFORMATION** (such as invites, announcements, email confirmation, etc.)

#### Attachments for non-recurring advertisements and legal advertisements:

- 1. **ORIGINAL INVOICE** *(A copy is acceptable only if it is certified by the Department Head)*

- 2. **PROOF OF PUBLICATION**

#### Attachments for other payment requests (subscription, membership, SSI payments, RF, remittances, etc):

- 1. **ORIGINAL INVOICE, BILLING OR RECEIPTS** *(A copy is acceptable only if it is certified by the Department Head)*
  - A monthly statement is not acceptable as a substitute for original invoice

- 2. **OTHER VENDOR REQUIRED ATTACHMENTS**

### IMPORTANT REMINDER

For revolving fund, please check program's protocol.
**CLAIM FOR REFUND FORM (RR) CHECKLIST**

Claim for Refund form is used to request a refund for any excess payment of fees, or amounts imposed for permits and licenses, or penalties, costs or deposits erroneously collected by the department. Refunds will be processed in accordance with SF Administrative Code Chapter 10, Article VI.

1. **ORIGINAL and COMPLETED CLAIM FOR REFUND FORM** (signed by claimant and approved by authorized signatory)

2. **COPY OF CHARGE SLIP** (to support the amount due and amount refundable to payee)

3. **COPY OF RECEIPT ISSUED BY DPH** (If no OR, other proof of payment)

4. **OTHER REQUIRED SUPPORTING DOCUMENTATION**
   - FAMIS print out of Cash Receipt document number (e.g. CRHC14000050 06)
   - EHS Vector Housing Program: copy of check log batch print out, notification letter to clients

**IMPORTANT REMINDER**

Provide W-9 for recurring refunds to set up a permanent vendor number (if not yet set up in FAMIS).
## DIRECT PAYMENT REQUEST (DPR) CHECKLIST

DPR is used for employee reimbursement requests for certification, professional license fees and parking tickets if specifically provided in the MOU. EMPLOYEES MUST NOT PROVIDE THEIR SSN in the form.

Submit original and completed DPR form duly approved by an authorized signatory with appropriate attachments.

### Attachments for employee reimbursement for certification, professional license renewal (with MOU provision):

<p>| | |</p>
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<tbody>
<tr>
<td>1.</td>
<td>PROFESSIONAL LICENSE REIMBURSEMENT REQUEST FORM (duly Approved by HR Manager)</td>
</tr>
<tr>
<td></td>
<td>- The form is available in DPHNET:  <a href="http://dphnet/node/773">http://dphnet/node/773</a></td>
</tr>
<tr>
<td>2.</td>
<td>COPY OF LICENSE RENEWAL FORM</td>
</tr>
<tr>
<td>3.</td>
<td>COPY OF NEWLY ISSUED LICENSE/CERTIFICATE</td>
</tr>
<tr>
<td>4.</td>
<td>PROOF OF PAYMENT (official receipt, front and back copy of cleared check, or copy of credit card statement)</td>
</tr>
<tr>
<td>5.</td>
<td>COPY OF THE CURRENT MOU PROVISION stating that the City shall reimburse employee for such payment (Please attach only the page that states the provision.)</td>
</tr>
</tbody>
</table>

### Attachments for employee reimbursement request for parking tickets (with MOU provision):

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<tbody>
<tr>
<td>1.</td>
<td>REQUEST FOR PARKING TICKETS REIMBURSEMENT FORM (approved by supervisor)</td>
</tr>
<tr>
<td></td>
<td>- The form is available in DPHNET:  <a href="http://dphnet/node/108">http://dphnet/node/108</a></td>
</tr>
<tr>
<td>2.</td>
<td>ORIGINAL NOTICE OF PARKING CITATION</td>
</tr>
<tr>
<td>3.</td>
<td>PROOF OF PAYMENT (official receipt, front and back copy of cleared check, or copy of credit card statement)</td>
</tr>
<tr>
<td>4.</td>
<td>COPY OF THE CURRENT MOU PROVISION stating that the City shall reimburse employee for such payment (Please attach only the page that states the provision.)</td>
</tr>
</tbody>
</table>
## TRAVEL/TRAINING AUTHORIZATION (TTA) CHECKLIST

TTA is completed prior to travel or training when employees will be requesting reimbursement for business related expenses after traveling to conferences and trainings on official city business. You do not need a TTA when seeking reimbursement for mileage and field expenses. If there are no other costs associated with travel, please submit a Field Expense Report.

**PLEASE DO NOT INCLUDE YOUR SSN.**

### 1. COMPLETED TRAVEL/TRAINING AUTHORIZATION FORM
- All required fields should be filled out completely
- List all expense items on form with an estimate of the associated cost
- Complete budget code information
- Must have signature section completed up to Deputy Director if total is $500 or less and up to the Director of Health if over $500

### 2. ATTACH AIRLINE QUOTE FROM CITY-APPROVED TRAVEL AGENCY
- Must obtain Travel/Training Authorization number in order to book the flight through the City Approved Travel Agent.
- If purchasing air fare from a non-city approved agency, staying additional days, choosing alternate airport or choosing to drive, provide written comparison quote from the City approved travel agency to verify savings or show any price difference.

### 3. ATTACH CONFERENCE INFORMATION

### 4. IF PLANNING TO RENT A CAR, IT MUST BE JUSTIFIED AND PRE-APPROVED ON TTA
- Written justification to demonstrate that this chosen mode is the most efficient, direct and economical mode of transportation.
- The city is self insured so no reimbursement for insurance

### 5. ATTACH HOTEL RESERVATION INFORMATION
- Lodging is reimbursable only up to the maximum Federal per-diem GSA (General Services and Administration) rate, unless documentation of the conference hotel rate is provided.


### 6. SUBMIT TO APPROPRIATE ACCOUNTING UNIT
- If funded by a grant, submit to grant accountant @ 1380 Howard, 4th Floor
- If funded by a workorder or special revenue fund, submit to 101 Grove Room 110
- If funded by general fund, submit to Accounts Payable @ 1380 Howard room 418 - only need to submit to accounting before travel if TTA # is needed for airfare.

### NON-REIMBURSABLE TRAVEL/TRAINING EXPENSES
- Meals per diem allowance unless it is approved as an exception by the department head or expressly stated in employee's MOU
- Items not supported by original or certified receipt, except for toll, bart, MUNI, parking meter and public telephone
- Cancellation fees/charges resulted from unjustified cancelled or modified travel arrangements
- Auto/Flight insurance
- Tips and gratuity

When combining personal travel with official business travel, there is no reimbursement for lodging, meal per diem, or any other expense incurred before/in between/after the conference/official business starts/concludes.
### TRAVEL EXPENSE VOUCHER (TEV) CHECKLIST

TEV is used for requesting reimbursement of business related expenses when traveling to conferences and trainings on official city business. Please use the Field Expense Report when seeking reimbursement for mileage and field expenses if there are no other costs associated with travel. PLEASE DO NOT INCLUDE YOUR SSN.

1. **TRAVEL/TRAINING AUTHORIZATION FORM** (pre-approved and completed prior to the travel date)

2. **ORIGINAL and COMPLETED TRAVEL EXPENSE VOUCHER**
   - All required fields should be filled out completely; and the form must be signed by the requestor and approved by the authorized signatory.

3. **CONFERENCE / TRAINING / MEETING AGENDA OR SCHEDULE**

4. **CONFERENCE REGISTRATION FEE - PROOF OF PAYMENT**

5. **ORIGINAL ITEMIZED HOTEL RECEIPT**

6. **TRANSPORTATION: AIRFARE, if using non-city approved agency where savings can be documented.**
   - Written price quote from one of the City-approved travel agencies (Orientex / Clement Travel / Airport Travel Agency) to verify the savings
   - Original Receipt with complete and detailed itinerary indicating the amount paid

7. **TRANSPORTATION: CAR RENTAL (pre-approved by Dept. Head):**
   - Original receipt with detailed rental agreement indicating the amount paid, along with written justification to demonstrate that this chosen mode is the most efficient, direct and economical mode of transportation available.
   - The city is self-insured so no reimbursement for insurance

7. **TRANSPORTATION: Using PERSONAL VEHICLE when air transportation option is not economical:**
   - Written price quote from one of the City-approved travel agencies (Orientex / Clement Travel / Airport Travel Agency) to verify the savings
   - Written justification for use of personal vehicle approved by authorized personnel
   - The form should indicate the starting point and destination, odometer readings, vehicle make, model and license number.

8. **ORIGINAL RECEIPT FOR ALL OTHER REIMBURSABLE EXPENSES**
   - Luggage fees (limited to first-checked bag per person)
   - Transportation costs: to and from airport - shuttle, public transportation, cab (up to $50 each way to and from home airport, subject to Controller's change)
   - Parking at airport (maximum of $18 Per Day, up to $120 full duration of travel, subject to Controller's change)
   - Parking at hotel (should be lowest cost parking available)
   - Reasonable business related costs: telephone calls, copying, fax, internet charges (purpose and necessity must be indicated).

### QUICK GUIDELINES: TRAVEL and TRAINING REIMBURSEMENT REQUEST

**ACCEPTABLE FORM OF RECEIPT**

- Original receipt from the vendor; OR
- Copy of receipt from the vendor CERTIFIED and SIGNED by DEPT. HEAD as TRUE and NOT SUBMITTED PREVIOUSLY; OR
- Copy of a bank-cleared check showing purchase information such as date, amount paid and description of item; OR
- Copy of bank or credit card statement (account number, and/or personal information BLOCKED) showing payment information.

**NON-REIMBURSABLE TRAVEL/TRAINING EXPENSES**

- Meals per diem allowance unless it is approved as an exception by the department head or expressly stated in employee's MOU
- Items not supported by original or certified receipt, except for toll, bart, MUNI, parking meter and public telephone
- Cancellation fees/charges resulted from unjustified cancelled or modified travel arrangements
- Auto/flight/travel insurance
- Personal telephone calls
- Parking and moving violation tickets or similar penalties
- Vehicle repair and maintenance costs
- Tips and gratuity

### IMPORTANT REMINDERS

- TEV must be submitted within ten (10) business days after the last date of travel.
- Mileage is not reimbursable when using city car.
- Lodging is reimbursable only up to the maximum Federal per-diem GSA (General Services and Administration) rate, unless documentation of the conference hotel rate is provided.
- LODGING is not allowed within the nine (9) Bay Area Counties unless pre-approved by the department head.
- Submit your reimbursement request with the required documentation on the checklist within 10 business days after travel or incurring expenditure to:
  - Accounts Payable and Procurement Section, San Francisco Department of Public Health
  - 1380 Howard Street, Room 418, San Francisco, CA 94103
- For additional reference, please visit the following weblinks:
### FIELD EXPENSE REPORT (FER) CHECKLIST

FER is used for reimbursable expenses (i.e. mileage and other field expenses) when attending meetings and conducting official business functions when there are no registration, hotel or other expenses involved.

PLEASE **DO NOT WRITE YOUR SSN.**

1. **ORIGINAL and COMPLETED FIELD EXPENSE REPORT**
   - All signatures (employee, supervisor, authorized signatory) must be original, **NO stamped signature.**
   - Description in the "PURPOSE" column must be comprehensible. **NO ABBREVIATIONS.**
   - For each route, provide legible beginning and ending odometer reading, and the starting (i.e. worksite or home, whichever is the closer of the two) and destination point.
   - Write the vehicle make, model, and license number
   - Write the funding source: index code and, if applicable, the grant code and detail or project code and detail

2. **AGENDA OR SCHEDULE, BROCHURES, EMAIL CONFIRMATIONS**
   - For meeting outside of San Francisco, submit email invitation, schedule, confirmation, or minutes
   - For training outside of San Francisco, submit agenda, brochures, and/or completion certificate

3. **WRITTEN justification, approved by the supervisor, **IF submitting a LATE Monthly Field Expense Report**
   - Reports should be received by Accounting no more than 30 days after the expense

4. **WRITTEN approval from the supervisor, **IF reimbursement request involves weekend or holiday work**

5. **WRITTEN explanation on why public transportation could not be used**
   - **IF** requesting reimbursement for parking within City limits

### IMPORTANT REMINDERS

- Submit one combined FER for the month
- Parking within city limits is reimbursable with explanation why public transportation could not be used
- Mileage rate is established by the controller
- Mileage is reimbursed when using personal vehicle, fuel is **not** reimbursed.
- Personal expenses such as private vehicle repair and maintenance are **not** reimbursable.
- Parking violations, moving violations and towing charges are **not** reimbursable under any circumstances.
- Bridge tolls, parking meters, pay phones and public transportation will be reimbursed without receipt
- All passengers in the vehicle must be on official business

For additional reference, please visit the following weblinks: