

Policy & Procedure Manual

MANUAL CHEQUES - FD-IV-1

POLICY

A manual cheque will be requested using a cheque requisition and must be accompanied by an invoice or original receipts.

Expenses of a personal nature will not be reimbursed which include but are not limited to expenses for:

- Recreational purposes (i.e. video rentals, mini-bars, etc.)
- Personal items
- Traffic and Parking violations
- Social events that do not constitute hospitality
- Alcoholic drinks
- Friends or family members

PURPOSE

To control the number of cheques issued for immediate use and payment of any items or invoices, etc. requiring prompt attention.

To ensure compliance with the Broader Public Sector Accountability Act in relation to the Travel, Meal and Hospitality Expenses Directive.

PROCEDURE

1. A Cheque Requisition (FD010) is prepared by the requester and approved based on the Delegation of Authority Policy FD-VIII-5. The "approver" ensures the form is fully completed and has the appropriate backup attached and forwards this to Finance.
2. The "approver" and "requester" may be the same as long as the cheque amount is in compliance with the Delegation of Authority Policy and the cheque is not payable to themselves.
3. A cheque is then prepared to accompany the above and made out to the party concerned.

POLICY: FD-IV-1
DEPARTMENT: Finance
CATEGORY: Accounts Payable
EFFECTIVE DATE: July 2019
SUPERSEDES VERSION DATED: December 2011
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4. This cheque and attachments are forwarded to the approved cheque signing authorities for signatures as specified in Appendix A. In practice, the payee and signing authority should not be the same person wherever practical.
5. The cheque is given or mailed out, as required.

RECOMMENDED BY: Director, Finance and Administration

APPENDICES: 2

OPERATIONAL ACCOUNTABILITY: Administration, Finance, Human Resources, Community Services Administration, Community Services (all)

ORIGINAL POLICY DATE: July 1993

AUTHORIZED BY: Executive Director

SIGNATURE:

A handwritten signature in black ink, appearing to be 'S. H. ...', written over a horizontal line.

SIGNING AUTHORITIES

Any two of:

President, Board of Directors
Executive Director
Director, Community Services
Director, Finance and Administration
Director, Human Resources
Manager, Community Services

**OPTIONS northwest
CHEQUE REQUISITION**

POLICY FD-IV-1
APPENDIX B

DATE REQUIRED: _____ AMOUNT: _____

CHEQUE PAYABLE TO: _____

REFERENCE/PURPOSE: _____

*(Please attach any applicable documentation
i.e. Invoice, Receipt or Order Forms, etc.)*

| COST CENTRE | ACCOUNT CODE | AMOUNT |
|-------------|--------------|--------|
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REQUESTED BY: _____ APPROVED BY: _____

DATE: _____ DATE: _____