

COUNTY OF ALAMEDA
OFFICE OF AUDITOR-CONTROLLER
REFUND OF FEES

Business Unit: _____ Voucher # _____
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CLAIMANT'S NAME:			
CLAIMANT'S ADDRESS:	CITY	ST	ZIP
PAYEE TAXPAYER ID NO. (TIN):	PAYEE'S VENDOR ID: 00000		
DATE OF OCCURRENCE:			
LOCATION OF OCCURRENCE:			
FACTS GIVING RISE TO CLAIM:			
SIGNATURE OF CLAIMANT: _____		DATE: _____	
PRINT NAME: _____		TELEPHONE NUMBER: _____	

Instructions:

1. Use this form to request refund of fees, which do not exceed \$500 (except that the limit for the County Clerk is \$1,500). If the amount is exceeded, a Board letter and Minute Order must accompany the claim.
2. This form should be signed by the claimant and the Agency/Department Head.
3. Enter a standard voucher and write the voucher number in the upper right corner of the form.
4. Submit the claim to PWA Fiscal, which will submit it to the Claims Unit, Auditor's Office, QIC 20111.

ACCOUNTING INFORMATION								
BU	ACCT	FUND	DEPT ID	PROG	SUB-CLS	BY	PROJECT	AMOUNT
PBWKS								
TOTAL								
VENDOR #: _____ INVOICE # _____ PAYMENT HANDLING <input type="checkbox"/> US MAIL <input type="checkbox"/> RETURN TO DEPT								
PAY COMMENTS (include Deposit Permit Number): _____								

DEPARTMENTAL INFORMATION	
DEPT NAME: <u>PUBLIC WORKS AGENCY</u>	
LIAISON: _____	QIC: _____ PHONE: _____
DEPT CLAIMS PROCESSOR: _____	DEPT. CLAIMS APPROVER: _____

CERTIFICATION OF DEPARTMENT HEAD	
I CERTIFY UNDER PENALTY OF PERJURY THAT NO COUNTY FUNDS HAVE BEEN EXPENDED IN CONNECTION WITH FILING OF THIS CLAIM AND RECOMMEND REFUND OF THE AMOUNT CLAIMED.	
DEPARTMENT HEAD: _____	DATE: _____

FOR AUDITOR'S OFFICE USE ONLY	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED REASON: _____
CENTRAL CLAIMS APPROVER: _____	DATE: _____

1. Allowable disbursements

- a) Refunds may be paid under the following conditions :
- The department received the money due to an administrative error (e.g. the money was received and deposited; then the payee discovers it should have been sent to another entity and requests a refund) or
 - The refund is being made directly from a Trust Fund or
 - The refund does not exceed \$500, with the exception of the County Clerk whose limit is \$1,500. (Board of Supervisors minute order, File No. 9763, dated January 9, 1996, gives blanket authority to the Auditor-Controller to process refund claims from all County departments that do not exceed these limits.) or
 - If the refund exceeds the above amounts authorized by the Board of Supervisors, the department/agency has received specific approval by the Board of Supervisors to pay the refund.

2. Location of Form

- a) To access the *Refund of Fees Claim* form, follow the path
Alcoveb Home > Document Center > ALCOLINK Financials > ALCOLINK Financials: Forms and Templates > Accounts Payable: Forms and Templates > Form 110-109, Refund of Fees.

3. Processing a Refund of Fees Claim

- a) The claim must be signed by the claimant. Resolve all issues regarding the amount due before submitting the claim.
- b) Complete *Form 110-109*, with the exception of the box "For Auditor's Use Only." The deposit permit number to record the receipt of the funds should be entered on *Form 110-109* in the section labeled "Pay Comments."
Enter a standard voucher in ALCOLINK Financials. The remittance address must exist in ALCOLINK Financials.
To set up a vendor, the department completes a *Request to Add/Modify a Vendor Record, Form 110-13*.
To access the form, follow the path *Alcoveb home > ALCOLINK Financials > ALCOLINK Financials: Forms and Templates > Accounts Payable: Forms and Templates > Form 110-13*.
After completing the form, the department sends it to the County Vendor Creator, the e-mail address is in the global address book under: *Auditor, Vendor Creator*.
- c) After the claim is entered in ALCOLINK, it is reviewed, approved on-line and signed by the agency/department head. The department then forwards the *Refund of Fees, Form 110-109* and supporting documents to the Claims Unit of the Auditor's Office for approval and payment.
Departments should send the voucher request to the Auditor's Office within five business days after the voucher is entered. This helps to reduce the number of outstanding vouchers at the end of each month. After the month closes, the accounting dates and journal dates of outstanding vouchers will not be in the same period. By the third week of the subsequent month, the Voucher Processor will delete vouchers that have not been centrally approved.
- d) The Auditor's Office usually processes claims within five to ten working days after receipt.
- e) The Auditor's Office mails the warrant by U.S. mail directly to the recipient or sends it to the department, based on the following information in ALCOLINK Financials:
- The payment handling instructions on the "Payments" page.
 - The "Comments" section on the "Invoice Information" page.

4. Documents to attach to the Refund of Fees form

- a) A copy of the deposit permit used when the funds were received by the department.
- b) An original copy of documents received from the entity requesting the refund.
- c) If the claim exceeds the amounts stated above, a Board letter or minute order must accompany the claim.
- d) The Auditor's Office may require additional documents to support the claim.

5. For more information

- a) For more information, contact the Central Approver (in the Auditor's Office) for your department.