

# The University of Texas at San Antonio

## Departmental Cash Handling Request Form

**Instructions:** Complete this form to request authorization to accept cash, checks and/or credit card payments on behalf of UTSA. Print and sign the completed form. Attach this form to the Departmental Cash Handling Security Policy and send to the Director of Financial Services via campus mail.

**For credit card payment requests only:** You may also use this form to request a merchant account/ID number, if applicable. Once approved, this form is forwarded to Accounting Services for further processing. A merchant account will not be assigned until your departmental security policy is on file.

Departments are responsible for compliance with administrative guidelines 4.1 - Cash Handling and Management (<http://www.utsa.edu/financialaffairs/opguidelines/4.1.html>) and 4.1.1 - Processing Cash Payments (<http://www.utsa.edu/financialaffairs/opguidelines/4.1.1.html>).

1. What type of payment(s) does your department want to accept? Check all that apply:	Cash <input type="checkbox"/>	Check <input type="checkbox"/>	Credit Card <input type="checkbox"/>
2. How often will your department accept the payment method(s) above? Is this for a one-time or ongoing event?			
3. How will your department accept these payments? Check all that apply:	In-person <input type="checkbox"/>	By-mail <input type="checkbox"/>	By-phone <input type="checkbox"/>
4. Describe the reason for accepting payments. For example, seminar series.			

5. What economic benefit to UTSA does your department expect to gain by accepting payments on behalf of UTSA?

a. What account will payments be deposited to? Enter the 8-digit account number, or:	—	—				
b. If depositing to multiple accounts, enter the 7-digit unit code:	—					

**Complete #6-12 if your department is requesting authorization to accept credit card payments:**

6. How will your department process credit card payments?  
**IMPORTANT:**

- The Fiscal Services processing method is limited to 50 transactions per event/month.
- Dedicated credit card machine processing method requires a merchant account be established.

a. If using a dedicated credit card machine, how many will your department purchase?	
b. If processing online using a third-party vendor, what is the name of the vendor?	

7. For dedicated credit card machine(s) purchases only: provide your department location (campus, building and room number) and a contact person (name and phone number) that will be responsible for receiving the shipment (mailed directly from the vendor):

Contact Name:	Contact Phone #:
Bldg/Room #:	Campus: <input type="checkbox"/> Main <input type="checkbox"/> DT <input type="checkbox"/> Other (If other is selected, enter your physical address below)
Physical Address:	

# The University of Texas at San Antonio

## Departmental Cash Handling Request Form

8. How many transactions does your department expect to process per event (for one time events) or per month (for ongoing events)?

9. Provide the following estimates for your department:

a. Average individual transaction amount: \$

b. Total payment income per fiscal year: \$

10. What type of credit card does your department want to accept? Check all that apply.

American Express®

Discover®

MasterCard®

Visa®

**NOTE:** Visa prohibits the credit card discount charge to be billed to the cardholder. If Fiscal Services is selected as the credit card processing method (question #6), FSO must assess the credit card discount charge to the departmental M&O account.

11. Provide the 10-digit account number to be used for the credit card discount fee expenses (preferably a 19-account):

12. Merchant account agreement (for use with credit card operations):

As a UTSA department, I have requested a merchant account number for use with credit card operations (either with a physical terminal or via data port). By signing below, I am assuming responsibility for the maintenance of this merchant account number and associated equipment as well as protection of cardholder personal information (credit card numbers and expiration dates). Additionally, I acknowledge that I am familiar with the Cash Management and Handling and Departmental Procedures for Credit Card Sales guidelines, which includes adhering to settlement and deposit frequency guidelines.

In the event that deposit(s) are not made in a timely manner, I have provided the following default revenue account in order that Accounting Services can deposit funds by the end of the month. It will be my responsibility to reconcile this account and request corrections if needed.

a. Default revenue account number:

### Requesting Department Contact Information

Department name:

Date:

Printed Name of Department Director or above:

UT EID:

Job Title:

Signature:

### Financial Services Use Only:

Approved:

Declined:

Date:

Signature:

Gary K. Lott, Director of Financial Services and University Bursar

### Account Services Use Only:

Merchant account/ID number:

Date:

Signature: