

**Default Question Block**

**QUALITY ASSURANCE REVIEW - FY23**

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**Please complete the questionnaire to the best of your ability by Department Manager or staff. Only one submission is required. During our scheduled review period, we will discuss your responses and review your supporting documentation, i.e. reconciliations, travel, purchasing history, etc.**

**If you have any questions, please contact:  
email: [leticia.vega@utsa.edu](mailto:leticia.vega@utsa.edu) phone: 210.458.5537  
email: [analise.lopez@utsa.edu](mailto:analise.lopez@utsa.edu) phone: 210.458.4158.**

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**Your name and title**

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**Department Manager name and title**

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**Department name**

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**Does your area belong to a Business Service Center? If yes, please provide the name and contact information of the Business Service Center representative.**

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**List the most common issues in your area. How would this review help you?**

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**Monthly SAHARA Reconciliation**

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**Please list the Department IDs that are listed under the responsibility of the Department Manager.**

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**Are the Cost Centers and Project IDs reconciled on a monthly basis?**

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- Yes
- No

**If no, please explain why Cost Centers and Project IDs are not reconciled monthly.**

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**Please explain your step by step procedure for monthly reconciliation in the space provided below.**

**E.g. Purchasing, travel, cash handling reconciliation**

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**Is the Department Manager signing/approving the monthly reconciliation in SAHARA?**

- Yes
- No

**Please list the employee name and title responsible for reconciling the Cost Centers and Project IDs under the responsibility of the Department Manager.**

**If applicable, what tracking mechanism outside of PeopleSoft do you have in place to monitor monthly transaction activity? *Please note Departments are no longer required to maintain a separate expense tracking system.***

- Quicken/Quickbooks
- Excel
- Other

**Purchasing One Card**

**Please list all One Card holders and their One Card reviewer and approver.**

**Please describe the travel process in your area; (if no travel is processed in your area please respond N/A).**

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**Cash Handling (Includes cash, credit cards, checks, donations, etc.)**

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**Does the department receive cash, checks or credit cards?**

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- Yes
- No

**What are the funds collected for?  
What kind of payment does your department receive?  
What cost center is used?  
Please provide average amount received per semester.  
Do you have a tracking log to document any amount collected?**

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**Please list the employee name and title who complete the following tasks in the space below.**

	Employee Name	Employee Title
1. Collects/Receives Money (By Mail or in Person)	<input type="text"/>	<input type="text"/>
2. Logs	<input type="text"/>	<input type="text"/>
3. Creates the Deposit Transmittal Form	<input type="text"/>	<input type="text"/>
4. Approves Deposit Transmittal Form	<input type="text"/>	<input type="text"/>
5. Walks to Fiscal Services	<input type="text"/>	<input type="text"/>
6. Does the monthly reconciliation	<input type="text"/>	<input type="text"/>
7. Approves the monthly reconciliation	<input type="text"/>	<input type="text"/>

**Please list additional employees here if more than one person**

**Have all employees with cash handling responsibilities completed the Cash Handling 101 course?**

- Yes
- No

**Has the cash handling forms been completed and returned to Fiscal Services?**

**Forms required:**  
**Departmental Cash Handling Request Form**  
**Departmental Cash Handling Security Policy**

- Yes
- No

**How do you limit access to receipt books & funds awaiting deposit?**



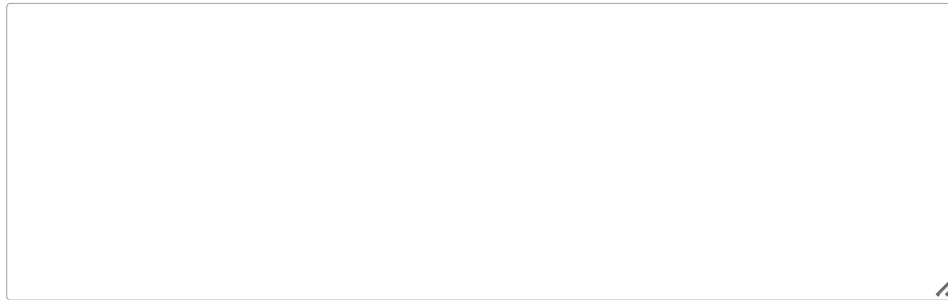
**Are funds deposited within 24 hours if the sum received is greater than \$500, or at least once weekly if less?**

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- Yes  
 No

**If no, please explain why they are not deposited within the required period.**

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**Do you have a Petty Cash fund (permanent, temporary)?**

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- Yes  
 No

**Is the Petty Cash fund periodically counted on a surprise basis by person other than the fund custodian & are the counts documented?**

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- Yes  
 No

**Does management investigate all substantial variations from norms?**

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- Yes  
 No

**Are overages and shortages recorded in the financial system?**

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- Yes
- No

### Gifts (Includes donations of money and non-money items)

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**Are gifts accepted in your area? *\*Please note this includes money donations***

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- Yes
- No

**If yes, please explain how gifts are monitored/tracked?**

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**How does your department ensure compliance with the terms of a gift agreement when expending funds from a gift Cost Center?**

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**Is the Operations and Advancement Services involved in the donation process?**

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- Yes
- No

**Do you disburse scholarships/fellowships?**

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- Yes

No

**If yes, how does your area ensure compliance with the terms of the gift agreement for each scholarship/fellowship?**

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### **Capital Assets Management (Inventory)**

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**Please list the name and title of the department Inventory Contact Person.**

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**Date the annual inventory report was last completed.**

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**If applicable, list any equipment missing based on last annual inventory report. Was it reported appropriately?**

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### **Information Security**

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**If applicable, how does your area ensure any sensitive data collected/retained is properly protected? (e.g., SSNs, credit card numbers, employee information, etc)**

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**Does the department own or manage any server hardware? If yes, where it is located and how does your department maintain inventory of these devices. If no, please put N/A.**

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### **People Excellence (Timekeeping and Employment)**

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**What process(es) does your department have in place to record timekeeping and time off?**

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**How does your area ensure all required processes are completed once a person ends his/her employment with UTSA? How do ensure that the terminated employee has returned all UTSA property?**

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**Have all employees completed the annual Conflict of Interest/Commitment disclosure in the portal?**

- Yes
- No

**If no, please explain.**

**Please provide any comments, questions, or concerns?**

**Block 1**

**Please note that once you submit the survey, you will not be able to access it again to make any changes. This is the end of the survey, if you are ready to submit, click submit.**