

SAVANNAH STATE UNIVERSITY

Departmental Cash Handling Form

Instructions: Complete the fields below. The purpose of this policy is to detail how your department will ensure the safety and security of cash, checks, and credit card information – such as numbers and expiration dates – from internal or external unauthorized users. Once completed and signed, attach this form to the Departmental Cash Handling Request Form and send to Comptroller and University Bursar via campus mail to Box 20419.

1. Enter your department/division name:		
2. Select the type of payment(s) your department will accept on behalf of Savannah State University (SSU) – (check all that apply)	Currency	
	Check	
	Credit Card	
3. How often will your department accept the payment method(s) above? Is this for a one-time or ongoing event?	One-time Event	
	On-going	
4. Describe the reason for accepting payments. For example, seminar series.		
5. Select the method in which your department will accept payments (check all that apply):	In-person	
	By-mail	
	By-phone	
	Online	
6. Describe where physical documents gathered for this payment process will be stored? Note: Physical documents must be kept in a locked area or cabinet.		

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7. Enter the employee name(s) and job titles who will have access to this secured location or who will be handling cash in your department:

Name	Job Title

8. In accordance with the institutional records retention schedule:

a. All physical and electronic records retained in our office will be kept for the current fiscal year and for the next three fiscal years. <i>NOTE: Credit card receipts containing customer signatures must be retained in the event of a customer initiated dispute.</i>	Agree
b. Credit card information such as credit card numbers and expiration dates will be shredded after the transaction is completed.	Agree
c. Credit card information stored on local hard drives will be properly secured and properly disposed. If any confidential credit card information is temporarily stored on a local hard drive, the computer is locked down. <i>NOTE: Hard drives must be wiped clean before disposal</i>	Agree

*Enter any additional information below.

Complete #9-13 only if your department will accept credit card payments on behalf of SSU.

9. Select the method in which your department will process credit card payments.

***NOTE:** Cash and checks must be processed at Bursar Office.*

10. If **Online with 3rd Party Vendor** was selected above, enter the vendor name and describe how reports are generated.

***NOTE:** Prior to contracting with any third-party providers, the department is responsible for requesting and maintaining a written confirmation that the provider acknowledges their responsibility for credit card data security.*

EXAMPLE: PayPal provides settlement and detail reports on their website, which we will download each day there is activity.

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11. Describe how your department will ensure that all cardholder receipts will include no more than the last four digits of a credit card number and no portion of the expiration date. It is strongly recommended that merchant receipts or reports are truncated in the same manner, but if your 3rd party vendor does not truncate merchant reports, you are required to keep printed reports in a secure, locked location at all times.

NOTE: Credit card slips from departmentally owned machines should only print the last four-digits of a credit card number.

12. If our department processes credit card payments using a dedicated credit card machine or a 3rd party vendor, we will also ensure that a settlement process is performed each day that credit card transactions are performed.

Agree

13. A Deposit Transmittal form will be completed and submitted one business day that credit card transactions are processed to ensure our university account is credited.

Agree

Complete #14-15 only if your department will accept cash and/or checks on behalf of SSU.

14. A Deposit Transmittal form will be completed and submitted:

- Within one business day if total receipts are \$500 or more.
- At least once per week if total receipts are less than \$500.

Agree

15. Our department will not photocopy checks, unless additional research or internal handling is required. If additional research or internal departmental handling is required, the customer account and routing numbers will be removed from the check photocopy.

Agree

Department Contact Information

Date:

**Printed Name of Department
Director or Above:**

Job Title:

Signature:

Comptroller and/or Bursar Use Only:

Approved on:

Approved by: