



6.1.12 Refunds

Chapter 6 - Fiscal	Original Effective Date: July 2000
Section: 6.1 Accounting	Date Last Reviewed: May 2017
Responsible Entity: Assistant Vice President for Business Affairs	Date Last Revised: May 2017

I. Purpose

To establish the appropriate processes for the issuance of refunds by UT Health San Antonio.

II. Scope

This policy applies to all individuals or entities associated with UT Health San Antonio who may request a refund.

III. Policy

When it is necessary to process a refund of amounts paid to UT Health San Antonio (UTHSA), the department is responsible for initiating and submitting the necessary paperwork to the Office of Accounting. Refunds are processed via the Payment Request and must provide the following information:

1. Name and address of payee to be refunded;
2. Vendor ID number of payee (if available);
3. Amount to be refunded;
4. Account and project ID number used on the original deposit;
5. Explanation for refund;
6. Deposit date, CR transaction number, receipt number, or original deposit (not applicable to UTMED, DSRDP, Bookstore, Continuing Education and University Police).

IV. Definitions

There are no defined terms used in this Policy.

V. Related References

There are no related documents associated with this Policy.

VI. Review and Approval History

- A. The approving authority of this policy is the University Executive Committee.
- B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority.

Effective Date	Action Taken	Approved By	Date Approved
07/2000	Policy Origination	Executive Committee	07/2000
05/2017	Policy Review	Executive Committee	05/2017