

UNIVERSITY OF HAWAII
 FORM INSTRUCTIONS
 LIST OF STUDENT FELLOWSHIP/TRAINEESHIP/STIPEND PAYMENTS (FMIS-36A)

PURPOSE:	To process subsequent student fellowship, traineeship, or stipend payments. Initial payment required on FMIS-36.
DATA ITEM	COMPLETION INSTRUCTIONS
	All fields must be completed unless noted as <u>optional</u>. Shaded items represent information to be completed by Disbursing. Refer to APM A8.856 for detailed policies and procedures.
CAMPUS	Enter campus code. Refer to Table A12.099.
DATE	Enter date form prepared.
DOCUMENT NUMBER	Enter 6-digit document number after "F". First 3 digits, 3-digit Fiscal Officer code. Last 3 digits are sequential control number assignment.
DEPARTMENT	Enter department name.
VOUCHER NO.	Enter voucher number.
SOCIAL SECURITY NUMBER	Enter payee's social security number.
PAYEE'S NAME	Enter payee's last name, first name and middle initial.
ACCOUNT CODE	Enter 6-digit account code. If each payment is to same account code, draw a line after first entry. See TYPE.
SUBCODE	Enter 4-digit subcode. If each payment is to same subcode, draw a line after first entry. See TYPE.
TYPE	Predefined.
P/F/N	Enter "N" for direct payment. If a miscellaneous encumbrance has been issued, enter a "P" for partial payment or "F" for final payment (any remaining encumbrance deleted).
AMOUNT	Enter amount of the fellowship/traineeship/stipend award to payee for each account distribution.
TOTAL	Enter total payment amount.
SIGNATURES	Signatures and dates are required by appropriate Project Director and Fiscal Officer.

<p>Submit the original List of Student Fellowship/Traineeship/Stipend payments to the Disbursing Office after approvals have been obtained.</p>
