

STATE OF HAWAII

Accounting Manual

Volume II: Budgetary Control Accounting
Part 600: Disbursements

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SECTION 642: TREASURY WARRANT NON-RECEIPT NOTICE, SAFORM C-50

1. Purpose. The purpose of the TREASURY WARRANT NON-RECEIPT NOTICE, SAFORM C-50, is to provide a uniform format for departments and expending agencies in requesting action on warrants that payees claim were not received.
2. Prepared By. This form is prepared by the authorized representative of the department or expending agency for the warrant in question.
3. Frequency. This form is prepared as frequently as needed, to report on warrants for which payees claim non-receipt.
4. Distribution.
 - (a) Copy #1 - To DAGS Accounting Division (where it is retained as file copy).
 - (b) Copy #2 - To DAGS Accounting Division, and returned to expending agency with response regarding action taken on notice.

July 1, 1979

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SECTION 642: TREASURY WARRANT NON-RECEIPT NOTICE, SAFORM C-50

ITEM NO.	DATA AND DATA INSTRUCTIONS
1	TREASURY WARRANT NON-RECEIPT NOTICE - Title of form.
2	One or more of the four boxes is marked with an "X".
3	If Item 1 is marked with an "X", enter the month, day, and year in the space provided to indicate the date when the outstanding warrant file was checked.
4	Applicable only for <u>payroll warrant</u> . One example in explaining a missing payroll warrant is: "Secretary mailed warrant to payee because payee was on vacation, but payee claims not to have received the warrant."
5	FOR COMPTROLLER USE ONLY - Do not use this section. Comptroller personnel (DAGS Accounting Division) will report appropriate action taken.
6	<p>_____ - Signature of responsible (Signature of Responsible Fiscal Officer) fiscal officer or his designated representative.</p>
7	<p>_____ - Enter the name of the expending agency that (Name of Expending Agency) is reporting the non-receipt of a Treasury Warrant.</p>
8	<p>_____ - Enter the telephone number of the person directly (Telephone No.) handling this type of action.</p>
9	<p><u> / / </u> - Enter the month, day, and year when this notice is signed. (Date)</p>
10	WARRANT IDENTIFICATION - Filled in by the expending agency based on identical data obtained for CLAIM FOR LOST TREASURY WARRANT, SAFORM C-47 or as shown on SUMMARY WARRANT VOUCHER and related records.
11	Payee _____ - Enter the payee's name.
12	Department Voucher No. - Enter the voucher number assigned by the department.
13	Warrant Amount \$ - Enter the amount of the warrant for which claim is being made.

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ITEM NO.	DATA AND DATA INSTRUCTIONS
14	Comptroller Voucher No. - Enter the voucher number assigned by the Comptroller.
15	Warrant Date - Enter the date of the warrant.
16	Payroll No. & Warrant Distribution Code - Enter only if it is a payroll warrant. Enter the payroll number and warrant distribution code.
17	Warrant Number _____ - Enter the alpha code above "(F)" that identifies (F) the warrant fund series from which the warrant was issued.
	Examples are:
	W - General Fund (2nd Series) Warrant or Welfare Warrant.
	P - Payroll Clearance Fund Warrant.
	E - Employment Security Administration Fund Warrant.
18	Warrant Number _____ - Enter the six or seven (Unemployment (Number) Compensation Fund Warrant only) digit number as preprinted on the top right or left corner of the warrant.

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STATE OF HAWAII
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES
ACCOUNTING DIVISION

① TREASURY WARRANT NON-RECEIPT NOTICE

TO: COMPTROLLER, State of Hawaii
(Attention: Accounting Division)

② We are informed by the payee of the State Treasury Warrant identified below that the warrant has not been received by the payee. The following action is therefore requested:

③ 1. If warrant is still outstanding (O/S), enter date as of which outstanding warrant file was checked (date: / /) and return a copy of this form to the expending agency.

2. If warrant is still outstanding, stop payment on warrant; issue duplicate warrant; and forward duplicate warrant to expending agency.

3. If warrant has been received and paid by the State Treasury, forward photocopy of cashed warrant (front and back) to expending agency.

4. (Other action requested) _____

A BOND FOR LOST WARRANT, if required, is attached to this notice.

④ If this notice covers a payroll warrant, the following information is provided regarding the manner in which the payroll warrant was distributed and the last known point of warrant possession: _____

⑤ FOR COMPTROLLER USE ONLY

Action Taken on Above Request:

1. Form returned with O/S date.

2. STOP PAYMENT/issued duplicate.

3. PHOTOCOPY sent.

4. (Other) _____

(Initials) / /
(Date)

⑥ _____
(Signature of Responsible Fiscal Officer)

⑦ _____
(Name of Expending Agency)

⑧ _____ ⑨ / /
(Telephone No.) (Date)

⑩ WARRANT IDENTIFICATION

INSTRUCTION: Payee name must be exactly as shown on SUMMARY WARRANT VOUCHER.

Payee ⑪ _____

Department Voucher No. ⑫ _____ Warrant Amount \$ ⑬ _____

Comptroller Voucher No. ⑭ _____ Warrant Date ⑮ _____

Payroll No. & Warrant Distribution Code ⑯ _____ Warrant Number ⑰ (F) ⑱ (Number)

STATE ACCOUNTING FORM C-50
JULY 1, 1979