

# INVOICE

**PLEASE PROCESS AS A SEPARATE PAYMENT  
FOR EACH VISA APPLICATION**

Invoice #: \_\_\_\_\_

**Pay to: U.S. Department of Homeland Security**  
Vermont Service Center  
75 Lower Welden St.  
Saint Albans, VT 05479

Date: \_\_\_\_\_

PO #: \_\_\_\_\_

**Bill to:** University of Central Florida

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DESCRIPTION	AMOUNT
Name visa is for: _____ <input type="checkbox"/> Regular visa processing fee – \$460.00 <input type="checkbox"/> Anti-fraud fee – \$500.00 <input type="checkbox"/> Premium processing fee – \$2,500.00	
<b>TOTAL</b>	<b>\$</b>

The department is responsible for emailing or bringing the shipping label to the Financials front desk along with all pertinent documents, per UCF Global, that should be submitted with the check.

**Department Contact (Print):** \_\_\_\_\_ **Telephone #:** \_\_\_\_\_

**Department Approval (DAL Approval Signature):** \_\_\_\_\_

The signed form requires review from UCF Global before it can be processed by Vendors Payable staff. Please forward to UCF Global at [VendorRequest@ucf.edu](mailto:VendorRequest@ucf.edu). For questions, call (407) 823-2337.

For UCF Global Use Only:		
Preliminary phase <input type="radio"/>	Intake phase <input type="radio"/>	DOL/LCA phase <input type="radio"/>

UCF Global Review: _____	Date: _____
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After completing the review, UCF Global should forward to Vendors Payable at [Vendor@ucf.edu](mailto:Vendor@ucf.edu).

## **Instructions on Requisitions/Invoices for Visa Fees (U.S. Department of Homeland Security)**

A requisition in the name of U.S. Department of Homeland Security should be created by the department:

1. Vendor Number: 25128
2. CATEGORY: **99005002 Fees/Sponsor/Warranty/Title**
3. Account Code: 749999
4. Input the description of service being provided on the Line Description. An example can be: visa processing fee for a specific person and include respective PID#.

A requisition should always be for one specific person. If visa fees are needed for more than one employee, a requisition should be created for each one.

There are 3 services available for purchase. A separate line must be provided for each service being purchased:

1. Regular Visa Processing Fee -\$460.00
2. Anti-fraud Fee -\$500.00
3. Premium Processing Fee -\$2,500.00

**Note:** Premium processing fees require additional justification to be attached to the requisition. Examples of those justifications are given below:

- For the employee to maintain employment or avoid a gap in employment, premium/rush processing is necessary.
- For the job candidate to begin work on specified start date listed on the offer of employment, premium/rush processing is required.
- For the employee to reestablish compliance, premium/rush processing is required.

After the requisition has been initiated and sourced to a Purchase Order, prepare Finance & Accounting Form 41-982. Complete the following information:

- Date: (Date of Invoice – mm/dd/yy)
- PO: (6 Digit Purchase Order Number)
- Bill to: Name of Department and address
- Description: Select appropriate fee(s) required

**Note:** Invoice number will auto generate with the Purchase Order number entered.  
Visa fees corresponding with the services selected on the form will automatically total.

Input a department contact and phone number to be reached at, in case any questions arise during the review and approval process. Have the invoice signed by an authorized approver on the Department Authorization List (DAL) for the department or project being charged. This signature may be electronic. Email Form 41-982 with all appropriate documentation to UCF Global at [VendorRequest@ucf.edu](mailto:VendorRequest@ucf.edu) with subject line "Form 41-982".

UCF Global will review each phase required for the completion of the document. The visa application must reach DOL/LCA phase and be approved. UCF Global will send the invoice to [Vendor@ucf.edu](mailto:Vendor@ucf.edu) with subject line, "Form 41-982".

After the approved form has been received by Finance and Accounting, the requesting department will be notified to produce a shipping label using the following address:

Maria Leviste, Univ. Team  
Fragomen, Del Rey, Bernsen & Loewy LLP  
800 NW 62<sup>nd</sup> Avenue  
Suite 590  
Miami, FL 33126

The shipping label should be e-mailed to [Vendor@ucf.edu](mailto:Vendor@ucf.edu) with subject line "Shipping label for Form 41-982, name of person for whom visa is being processed" (ex: Shipping label for Form 41-982, John Knight").

Any questions on the form or approval process may be submitted to [Vendor@ucf.edu](mailto:Vendor@ucf.edu) with a subject line of. "Form 41-982 Assistance".

Updated (12/19)