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May 2009

To: GED Contract Holders  
GED Chief Examiners

From: Patricia Mooney

Re: Standard Voucher  
Continuation/Summary Sheet  
ROS Reimbursement (Part II)

As you are aware, the GED Testing Office of the State Education Department has implemented a new set of guidelines for reimbursement for public GED testing centers in New York City that were awarded new SED contracts. Effective December 1, 2008, all public testing centers outside New York City with SED T-Contracts (under \$50,000.00) must apply for reimbursement using new procedures including the forms which are attached to this memo.

- A sample of the GED Testing Reimbursement Form
- A blank GED Testing Reimbursement Form
- A memo detailing instructions for completing the GED Testing Reimbursement Form.

Effective April 1, 2009, all public testing centers outside of New York City with SED C contracts (over \$50,000.00) must apply for reimbursement under the new system.

As we have previously discussed, the submission of the GED Testing Reimbursement Form along with the test candidates' completed materials after each test session is the initial step in the reimbursement process.

The next step in the process involves the submission of the attached Continuation/Summary Sheet and the Standard Voucher. The purpose of this memo is to give detailed instructions on how both these documents are to be completed. As with the previous package sent to the field, in addition to this memo we have included the following documents:

- A blank Continuation/Summary Sheet
- A sample Continuation/Summary Sheet
- A blank Standard Voucher
- A sample Standard Voucher

Please follow the detailed instructions below to ensure that both the Continuation/Summary Sheet and Standard Voucher are filled out properly so your reimbursement claims may be processed in a timely manner. If the Continuation/Summary Sheet and Standard Voucher are not completely filled out or are not filled out according to the sample forms, they will be returned to you for revision and resubmission.

The Continuation/Summary Sheet and Standard Voucher must be completed on a monthly basis and sent to the GED Testing Office. If, for example, you are requesting reimbursement for several test sessions during the month of December 2008, then the Continuation/Summary Sheet and Standard Voucher must reflect this and contain only data from GED testing sessions conducted in December 2008.

## **CONTINUATION/SUMMARY SHEET**

### **Instructions for completing the Continuation/Summary Sheet**

This sheet needs to accompany the Standard Voucher for processing. Please follow the instructions below to make sure your vouchers are processed in a timely manner. As you read the instructions, please use the enclosed sample Continuation/Summary Sheet as a guide.

#### **Payee Name**

Write in the name of the contract holder, not the testing center.

#### **Purchase Order Number and Date**

Write in the dates of the test session for which reimbursement is requested (e.g. December 15-16, 2008).

#### **Description of Materials/Service**

Write the name of the GED Testing Center which administered the test and the number and type of testers served. Make sure you indicate whether the test was administered in English, Spanish or French.

#### **Quantity**

Write the number of testers in the column under **Quantity**.

#### **Unit**

Leave this column blank.

**Price**

Write in the Regular Tester Fee (\$20.00), Per Session Fee (\$225.00) Modified Tester Fee (\$200.00), or other appropriate fees in the column labeled **Price**. *N.B. If your testing center is located in the county of Nassau, Suffolk, Westchester, Putnam or Rockland the Modified Full Tester Fee is \$225.00.* (Please refer to the sample GED Testing Reimbursement Form for assistance if necessary).

**Amount**

Multiply **Quantity** by **Price** and put the result in the box under the column labeled **Amount**. Multiply these two figures together only when a per tester fee is used. When a per session fee is used as in the case with a small number of testers (e.g. county jail) or modified testers, the per session fee is written under **Price** and **Amount** and no multiplication is necessary.

**Number of Testers (English, French, Spanish)**

Write in the number of testers, separating them by language group of English, French or Spanish. Add the numbers of the three groups and then write the total to the right of the space **NUMBER OF TESTERS**.

**Carried Forward**

Add up all of the entries under the **Amount** column and put the total figure to the right of **Carried Forward**. Please keep in mind that the cumulative total submitted in the **Carried Forward** on the Continuation/Summary Sheet and the total amount labeled **Net** on the Standard Voucher must be identical.

**STANDARD VOUCHER**

**Instructions for Completing the Standard Voucher**

As you read these instructions, use the enclosed sample Standard Voucher as a guide.

**Payee ID**

Write the Tax ID or Municipal code of the contract holding agency.

**Payee Name**

Write the name of the contract holding agency (e.g. ABC BOCES)

**Payee Address**

Provide the complete address of the contract holder.

**Purchase Order No. and Date**

Write in the month for which reimbursement is being requested. (e.g. December 2008)

**Description of Material Service**

Write in the total number of Regular Full Testers, Modified Full Testers or other type of Testers (Please refer to the sample GED Testing Reimbursement Form for assistance if necessary).

**Quantity**

Indicate the total number of testers and type. This figure should be taken from the **Continuation/Summary Sheet**.

**Price**

Write in the Regular Tester Fee (\$20.00), Per Session Fee (\$225.00), Modified Full Tester Fee (\$200.00) or other appropriate costs. ***N.B. If your testing center is located in the county of Nassau, Suffolk, Westchester, Putnam or Rockland the Modified Full Tester Fee is \$225.00.*** (Please refer to the sample GED Testing Reimbursement Form for assistance if necessary)

**Amount**

Multiply **Quantity** by **Price** and put the result in the box under the column labeled **Amount**. Multiply these two figures together only when a per tester fee is used. When a per session fee is used as in the case with a small number of testers (e.g. county jail) or modified testers, the per session fee is written under **Price** and **Amount** and no multiplication is necessary.

**TOTAL NUMBER OF TESTERS**

Write in the total number of testers by adding up all the figures under the column labeled **Quantity**. Write the **Amount** to the right of the space **TOTAL NUMBER OF TESTERS**.

**Total**

Add up all of the figures under the column **Total** and write the sum in the space to the right of **Total**.

**Discount**

Enter a 0 in the space.

**Net**

Copy the number from **Total** (two rows above **Net**) and enter it in the space to the right of **Net**.

## **Payee Certification**

The Chief Fiscal Officer/CEO must sign in the space labeled **Payee's Signature in Ink**. The title of that person must be written in the space labeled **Title**. The CFO/CEO must date the form and then write in the **Name of Company** (Contract Holder).

Please remember that this form is not to be signed by the Chief Examiner of the GED Testing Center.

If the contract holder (e.g. ABC BOCES) oversees the administration of the GED Test at multiple sites and their sites conducted GED Tests in December 2008, it would have to submit one (1) Continuation/Summary Sheet and one (1) Standard Voucher to reflect all of the locations (e.g. Albany, Rochester, etc...) and all the testing dates in December 2008.

Although it is preferable that you submit the State Education Department Continuation/Summary Sheet provided here, you may submit your own summary sheet as long as it clearly shows the following information:

- Payee Name
- All test dates
- Description of Material/Service
- Quantity of Testers
- Type of Testers (Regular, Full, Modified, etc...)
- Language Version of Test (English, French, Spanish)
- Price (Per Tester or Per Session fee)
- Amounts of Reimbursement Requested for each GED test session
- Total number of Testers separated by language type
- Total Reimbursement Requested

I hope you find this information to be helpful. If you have any questions or need additional information, please do not hesitate to contact Chip Zimmerman at [lzimmerm@mail.nysed.gov](mailto:lzimmerm@mail.nysed.gov) or at (518) 474-0422.