

## **Accounts Payable Check Request Guide**

1. Prior to submitting the Accounts Payable Check Request Form, review the <u>qualifying items for check</u> request to make sure the items are allowed to be processed via check request. Go to the <u>Accounts</u> Payable Check Request form page and complete the relevant sections. All fields with \* are required.

ECTION 1 - PAYEE INFO	RMATION	
Payments payable to: 🧕	Faculty/Staff/Student O Vendor	
/endor Number:	* Vendor Name:	* CWID:
	Tuffy Titan	888888888
Address:		
800 N. State College Blvd.		
<sup>r</sup> City:	* State:	* Zip:
-		02021
Fullerton Category: VIRTUAL CONFERENCE REGISTR	ATION- Preferred method through pcard (Virtual	Conference must be stated on registration or provide verifi
Fullerton Category: VIRTUAL CONFERENCE REGISTR	ATION- Preferred method through pcard (Virtual IDLING INSTRUCTIONS	Conference must be stated on registration or provide verifi
Fullerton Category: VIRTUAL CONFERENCE REGISTR	ATION- Preferred method through pcard (Virtual ADLING INSTRUCTIONS Invoice Date: 06/30/2021	Conference must be stated on registration or provide verifi
Fullerton Category: VIRTUAL CONFERENCE REGISTR ECTION 2 - CHECK HAN nvoice Number: 12345 nvoice Description:	ATION- Preferred method through pcard (Virtual  IDLING INSTRUCTIONS  Invoice Date: 06/30/2021	Conference must be stated on registration or provide verifi

- 2. The Requester, Requester Email, and Requester Ext. are automatically populated based on the credentials of the person initiating the check request. These fields can also be manually updated if necessary.
- 3. The Approver, Approver Email, and Approver Ext. are entered manually by the person initiating the check request. This should be an authorized approver of the department per the delegation of authority (DOA), which is located in the OBIEE dashboard. Reviewer Email is optional and may be entered if the requester wants to submit the check request to someone for review prior to approval.



4. Complete the following chartfields as necessary: (a) account number (based on category selected), (b) fund, (c) department ID, (d) program code, (e) class code, (f) project ID.

* Requester:	* Requester Email:	* Requester Ext:
Tuffy Titan	tuffytitan@fullerton.edu	7714
* Approver:	* Approver Email:	* Approver Ext:
* Approver:	* Approver Email:	* Approver Ext:

5. After completing all relevant information, click the Submit button at the bottom of the page.



6. After submission, a confirmation window will appear.

## **Submission Confirmation**

Thank you for submitting the Accounts Payable Check Request. The requester email address will receive an email from Adobe Sign to complete and sign the form.

After the check request has been approved in Adobe Sign, please email <u>ap@fullerton.edu</u> the check request number (DP#) and the vendor name so the completed check request can be processed.

7. An email from <u>apforms@fullerton.edu</u> is sent to the requester's email, asking for review and signature on the check request. Clicking the "review and sign" link will take you to the Adobe Sign webpage.

FULLERTON Adobe Sign			
apforms@fullerton.edu apforms@fullerton.edu requests your signature on Accounts Payable Check Request			
<b>Review and sign</b>			
After you sign <b>Accounts Payable Check Request</b> , the agreement will be sent to <b>CSUF</b> <b>Tax Office.</b> Then, all parties will be notified via email. As you prepare to sign this agreement, please note that the document asks for the following documents to be attached:			
<ul> <li>Document 1</li> <li>Document 2</li> <li>Document 3</li> <li>Document 4</li> <li>Document 5</li> </ul>			
Don't forward this email: If you don't want to sign, you can delegate to someone else.			

8. The PDF copy of the Accounts Payable Check Request form is imported into Adobe Sign, where the form can be updated for any necessary changes as a result of the review.

	ACCOUNTS PAYABLE CHECK REQUEST FORM
INSTRUCTIONS	
1) Use the link	to view approved categories.
	Click on link to view approved categories. https://adminfin.fullerton.edu/finance/ap_travel/documents/ap_documents/QualifyingttemsForCheckRequests.pdf
<ol> <li>2) Payment will provided and documentatic</li> <li>3) Use one Che</li> <li>4) Person requires</li> <li>5) Person approvements</li> <li>6) Submit the and</li> <li>6) Submit the approvements</li> </ol>	<u>only</u> be issued on an approved category listed as a direct payment (no purchase order required ) Al required information must be original invoice, order form, renewal notice or other appropriate documentation must be attached. Submittals without appropriate on as outlined above will be returned to the department. ext Request Form per invoice. Services are not permitted on this form. esting this Check Request certifies that he/she has requesting authority for the Fund and Department listed. voing this Check Request certifies that he/she has requesting authority for the Fund and Department listed. Voing this Check Request Form certifies that he/she has requesting authority for the Fund and Department listed. (Responsible person for oncound Check Request Form (D-20) for encreasion
<ol> <li>Payment will provided and documentatic</li> <li>Use one Che</li> <li>Person requires</li> <li>Person approthered</li> <li>Submit the agent of the Fund and</li> <li>Section 1 - PAY</li> </ol>	Conty be issued on an approved category listed as a direct payment (no purchase order required.) All required information must be original invoice, order form, renewal notice or other appropriate documentation must be attached. Submittals without appropriate on as outlined above will be returned to the department. esting this Check Request Form per invoice. Services are not permitted on this form. esting this Check Request cortifies that he/ahe has requesting authority for the Fund and Department listed. Yoing this Check Request Form certifies that he/ahe has requesting authority for the Fund and Department listed. (Responsible person for Department, College Financial Manager, Division Financial Manager, Division Head) proved Check Request Form (Dr.930 for processing. uests submitted that is not on the approved category list will be returned to the department. For questions on direct payment, please fulleron.edu EE INFORMATION
<ol> <li>Payment will provided and documentatic</li> <li>Use one Che</li> <li>Person requi</li> <li>Person appro- the Fund and</li> <li>Submit the ag</li> <li>All check reg contact: ap@</li> </ol> SECTION 1 - PAY Vendor Number (if known)	Conty be issued on an approved category listed as a direct payment (no purchase order required.) All required information must be original invoice, order form, renewal notice or other appropriate documentation must be attached. Submittals without appropriate on as outlined above will be returned to the department.           ex Request Form per invoice. Services are not other appropriate documentation to the function of the service are not other appropriate authority for the Fund and Department listed.           voing this Check Request certifies that he/she has requesting authority for the Fund and Department listed. (Responsible person for Department, College Financial Manager, Division Financial Manager, Division Financial Manager, Division Head)           proved Check Request Form to CP-300 for processing.           uests submitted that is not on the approved category list will be returned to the department. For questions on direct payment, please fulleron.edu           EE INFORMATION         CWID         88888888
<ol> <li>Payment will provided and documentatic 3) Use one Chr 4) Person appre- the Fund and 6) Submit the ap (7) All check reg contact: ap@</li> <li>SECTION 1 - PAY Vendor Number (f known)</li> </ol>	Conty be issued on an approved category listed as a direct payment (no purchase order required.) All required information must be original invoice, order form, renewal notice or other appropriate documentation must be attached. Submittals without appropriate on as outlined above will be returned to the department.         ex Request Form per invoice. Services are not other appropriate documentation the Fund and Department listed. Submittals without appropriate on this form.         esting this Check Request Form certifies that he/she has requesting authority for the Fund and Department listed. (Responsible person for J0 peartment, College Financial Manager, Division Financial Manager, Division Head)         proved Check Request Form to CP-300 for processing.         uests submitted that is not on the approved category list will be returned to the department. For questions on direct payment, please fulleron.edu         EE INFORMATION         * Tuffy Titan
2) Payment will provided and documentatic 3) Use one Chr 4) Person requires 6) Submit the ag 7) All check regire contact: ap@ SECTION 1 - PAY Vendor Number (ff known) Vendor Name Remit to Address	Conty be issued on an approved category listed as a direct payment (no purchase order required.) All required information must be original invoice, order form, renewal notice or other appropriate documentation must be attached. Submittals without appropriate on as outlined above will be returned to the department.         ex Request Form per invoice. Services are not other appropriate documentation must be direct payment (no purchase order required.) All required information must be original invoice. Services are not other appropriate documentation must be direct payment (no purchase order required.) Submittals without appropriate on as outlined above will be returned to the department is form.         esting this Check Request Form corfises that he/she has requesting authority for the Fund and Department listed. (Responsible person for Department, College Financial Manager, Division Financial Manager, Diterve Manager, Diterve Manager, Division Financial Manager, Divis



9. After reviewing in Adobe Sign, select the "\*Click here to sign" field and enter the current date.

Next SECTIO	SECTION 3 - APPROVALS		: <sup>*</sup> Click here to sig	(n	
Request	Requester *Tuffy Titan		tuffytitan@fullerton.e	du	Ext <sup>*</sup> 7714 Date <sup>*</sup>
	Print Name	Signature			
Approve	Framroze Virjee				Ext 3456 Date
	Print Name	Signature			
	*660848	THEFD 1000	5		
	Account (6)	Fund (5) Departs	nent (5) Program (4)	Class (5)	Project (8)

10. Select the "\*Click to Attach Document 1" to attach files to support the check request submission. A minimum of at least one attachment is required. Attach all the necessary documents for processing. If the attachment includes copies of invoices and other documents, ensure that the documents are appropriately signed and approved per DOA (e.g. membership justification form, CSUF invoice form, etc.). Documents can either be attached separately or combined into one attachment.

SECTION 4 - ATTACHMENTS					
Attach all required supporting documents, such as but not limited to original invoices, Hospitality Documentation and Approval Form (D11), membership justification form, etc., as applicable.					
	······································				
*Click to Attach Document 1 Click to Attach Document 2 Click to Attach Document 3					
Click to Attach Document 4	Click to Attach Document 5				

11. After completing all relevant sections, click on the checkbox to agree to the Terms of Use and the Click to Sign button.

<b>~</b>	I agree to the <u>Terms of Use</u> , have reviewed the <u>Consumer Disclosure</u> and agree to do	Click to Class
-	husing and the size line with CCU. California Chata University Full anton	Click to Sign
	business electronically with CSU - California State University Fullerton	

12. After electronically signing in Adobe Sign, the check request will be routed to the approver's email address, and the notification below will appear on the webpage. If a reviewer's email (optional) was provided, the check request will be routed to the reviewer first and then to the approver.
Note that the reviewer will not be able to medify the form period attachments to the file. The reviewer.

Note that the reviewer will not be able to modify the form nor add attachments to the file. The reviewer may assign the reviewer role to somebody else by selecting the delegate option from the email or through the drop-down option in Adobe Sign. If the reviewer declines to approve the check request, the preparer will have to complete another check request form from the beginning in order to proceed.

✓ You're all set
You finished signing "Accounts Payable Check Request".
Next, Framroze Virjee will sign.
All parties will be notified via email. You can also download a copy of what you just signed.
Manage your Adobe Sign agreements

13. The approver will receive the email below for their review and signature.



14. Only the following fields can be updated by the approver: (a) Approver Name, (b) Approver Ext., and (c) Date. The approver will need to select "\*Click here to sign" and then enter the date.

	Print Name	Signature	
Next	Approver Framroze Virjee	* Click here to sign	Ext 3456 Date
	Print Name	Signature	
	<u>6  6  0  8  4  8</u> <u>T  H  </u> Account (6) Fund (5)	E F D 1 0 0 6	

The approver will be asked to select the checkbox to agree to the Terms of Use and the Click to Sign button.

I agree to the Te	<u>ms of Use, have reviewed the Consumer Disclosure and agree to do</u>	Click to Class
business electre	nically with CELL California State University Fullerton	Click to Sign
Dusiness electro	nically with CSU - California State University Fullerton	

15. After approval of the check request, this window will appear for the approver in Adobe Sign.



## Accounts Payable Check Request Guide



An email notification will be sent to the email address of the preparer, approver, and <u>apforms@fullerton.edu</u>. The submitted check request and attached supporting documents may be downloaded by selecting the "open the final agreement" link in the email for your records.

FULLERTON A VIATE ENVIRENTY Adobe Sign
All parties finished
Accounts Payable Check Request
Open agreement
The agreement is completed between: <ul> <li>CSU - California State University Fullerton</li> <li>Tuffy Titan</li> <li>Framroze Virjee</li> </ul>
You can open the final agreement to review its activity history or download a copy for reference.
The agreement is fully executed. The sender of this agreement has control over the retention period for this agreement which determines the amount of time it will be available for download from Adobe Sign.

16. Send an email to <u>ap@fullerton.edu</u> to indicate that the check request form has been completed and is ready for A/P processing. The subject line should include the check request's assigned DP# and the vendor name. The A/P team will contact you if additional documents are required or if the check request needs to be resubmitted.

	From 🔻	tuffytitan@fullerton.edu
	То	ap@fullerton.edu
Send	Сс	
	Subject	Check Request DP#202177 for Juffy Titan
Hello The cł Thank Tuffy	A/P Team, neck reque s, Titan	st referenced above is ready for processing.

## Accounts Payable Check Request Guide



17. When the approver indicated on the check request is not an authorized signatory of the department, that person can delegate the Adobe Sign request to an appropriate approver by clicking on the "delegate" link on the email they received.



They can enter the email address of an appropriate approver and include a short message to provide the reason for the delegation.

Delegate this document	
To send this document to another individual in your organization for signature, enter their email address and a message below.	
Email:	syim@fullerton.edu
Marran	
Message:	Hello - I do not have authority to approve department 10006. Please approve.
	h
	Delegate

If you have any questions, please contact Accounts Payable at <u>ap@fullerton.edu</u>.