

Agency Payment Voucher (APV) Instructions

Getting Started

- In eForms, go to Create New Form → Accounting → Agency Payment Voucher.

[Logout 52069](#)

Create New Form	Description
All	Agency Payment Voucher
Accounting	Allocated Budget Transfer
Admin/Financial Reporting	BPC Account Action Request
Cashiering	BPC Cardholder Dispute Form
Fixed Assets/Inventory	Business Procurement Card Voucher
Purchasing	Cancellation of Electronic Deposit of Vendor Payment
Spa	Change Fund Long/Short
Savable Forms	Change Fund Maintenance
Search Existing Forms	Change Fund Reconciliation
Form Status	DA-22 Moving Expense Agreement
Document Tracking	Delegation of Authority
Vendor Search	Domestic Wire Request
Main Menu	Encumbrance Correction
My Account	
Changelog	
Support	

Header Tab

- Document Org: Department creating the document.
- User Number: Optional, for department tracking.
- Invoice Date (Transaction Date): Date on the invoice.
E2xxx – Use end date of service or Invoice date if end date is future date
E3xxx/E4xxx – Use invoice date (if multiple invoices, use most recent date)
Note: Invoices occurring over multiple fiscal years must be placed on different vouchers.
- Remittance Info: Information that prints on the vendor check. Invoice number is recommended.
- Check Type: Select State unless directed otherwise.
 - Additional options: *Imprest Request, Local Agency, Organizational Safekeeping, State – Manhattan, or FFELP* - email contsys@ksu.edu and copy your supervisor to request access.
- Wire Type: Select Not a Wire, U.S. Dollars (Domestic or Foreign), or Foreign Currency.
- Title: Brief description of the document.
- Click Next to move through each tab.

Document Number: 2451388	Header Vendor Agency Funding Purch Description Flags Trustees Final Form Check In
Finished	Header Information
Agency Payment Voucher	Document Org: 05040 Division of Financial Services ▼
Funding Total: \$0.00	User Number: <input type="text"/>
Description Total: \$0.00	Invoice Date: 08/06/2025 <input type="text"/> Invoice Date Tips (Transaction Date): (MM/DD/YYYY)
Totals Match	Remittance Info: <input type="text"/>
	Check Type: State ▼
	Wire Type: Not a Wire ▼
	Title: <input type="text"/>
	Next

Vendor Tab

- Search first to avoid creating duplicate vendors. Search by partial name if necessary.

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Finished

Agency Payment Voucher

Funding Total: \$0.00

Description Total: \$0.00

Totals Match

Header Vendor Agency Funding Purch Description

Vendor Information

New Vendor Edit Vendor **Search**

Vendor ID:

Vendor Site ID:

Payment Indicator:

Vendor No/Sfx:

Vendor Name:

Address:

City:

State:

Zip: -

Country:

Search for Vendor				
By Name	US	Search	Cancel	
	Vendor Name	Vendor DBA	Vendor Nbr	Street
Use	15-24 BREW HOUSE LLC		8XXXX6905	420 LINCO
Use	2287 KSU SALINA CAMPUS STORE	ACC2287PT1SPRING223	3XXXX3135	3146 SOLU
Use	5-H GREENHOUSES LLC		3XXXX7237	PO BOX 25

- Only add a new vendor if the vendor does not display in the search.
 - New vendors are required to submit tax documents through the [Vendor Upload Portal](#).
- Edit Vendor if remit address needs to be updated to match address listed on invoice.

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Finished

Agency Payment Voucher

Funding Total: \$0.00

Description Total: \$0.00

Totals Match

Header Vendor Agency Funding Purch Descript

Vendor Information

New Vendor **Edit Vendor** Search

Vendor ID: 16790115

Vendor Site ID: 2023333

Payment Indicator:

Vendor No/Sfx: 8XXXX6905 1

Vendor Name: 15-24 BREW HOUSE LLC

Address: 420 LINCOLN AVENUE

City: CLAY CENTER

State: KS

Zip: 67432 - 2908

Country:

- Payment Indicator Box: Blank = check mailed to vendor; X = ACH payment; A = check returned to Agency Tab contact.

Agency Tab

- Enter Department, Contact, and Phone information.
 - Use 'Save This Information' to store for future APVs.

Funding Tab

- Multiple funding strings allowed.
- Enter Amount, Project, Award, Fund Source, Org, Object Code, then click Save.
 - Reference the [Object Code Listing](#)
 - Leave Award blank if none exists.
 - Order No, Line, and M used only for prior-year encumbered payments.

Purchasing Tab

- Enter purchase requisition or contract number.
- For purchases \$10,000+, contract number must match the [Contract Lifecycle Management System](#).

Description Tab

- Complete Date, Invoice No, Quantity, Unit, and Unit Price. Amount auto-calculates.
- Provide a brief description and business reason, split out multiple items.
- Invoice Number Best Practices: Max 10 characters, use invoice number as issued, avoid special characters, remove leading zeros, follow department policy if missing invoice number.
 - Example: 87-AGR 251 would be 87AGR251; 00000058736 would be entered as 58736; An August 2025 invoice with an Account Number of 4721198 would be entered as 211982508.

Flags Tab

- If applicable, select flags to clarify expenses (max 3 appear on PDF).
 - Note: Flags are for internal use only.

Trustees Tab

- Add K-State employees as trustees if additional access is needed.
- Search by name or department to add.

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Finished

Agency Payment Voucher

Header Vendor Agency Funding Purch Description Flags Trustees Final Form Check In

Add Trustee

No Trustees Found

Next

Final Form Tab

- View Form to verify and print for signatures.
- Upload signed voucher and supporting PDFs (invoice, receipts).

Upload Signed Form and Supporting Documentation

- Click 'Upload File'
- Drag and drop the file or select 'Choose File' to attach the required signed form
- Click 'Refresh' if additional supporting documentation is needed

For complete instructions on uploading and viewing uploaded documents, [Click Here](#)

Note: If "inbox" shows below instead of an upload form, reload the page.
If the form below does not load after 60 seconds, [Click Here](#).

Upload File:

Supporting Documents (0)

Refresh Delete Selected View Selected

Important: Uploading a document with the same file name will overwrite the existing file. Double-check file names to avoid replacing necessary documents.

Preventing Duplicate Payments

- If you see a duplicate warning: verify if invoice was already paid before submitting.
 - Use eForms Search: check by invoice number or vendor name.

Possible Duplicate Invoice(s)

This document may contain an invoice that has already been paid. Please review the document(s) listed below.
If this is not a duplicate payment, please proceed with submitting the document.

Invoice	DocNo	FormType	Vendor
603986	245	APV	STAPLES

- Check documentation: confirm invoice hasn't already been paid per the statement; note any credits received on the APV.
- Cross-check payment methods: confirm invoice not paid via P-Card or Foundation.
- Review [FIS](#) transaction reports regularly for potential duplicates.

Check In Tab

- After signatures and attachments, click Send Electronically to submit to the Division of Financial Services.

Document Number: 2451388	Header Vendor Agency Funding Purch Description Flags Trustees Final Form Check In
	Final Edits
	Errors
	Please upload signed copy of form
Finished	Send Electronically
<i>Agency Payment Voucher</i>	

Questions?

Division of Financial Services – Accounts Payable

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