<u>Agency Payment Voucher</u> <u>Completion Instructions</u>

Using

eForms

Screens for Input

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I. Overview of Agency Payment Voucher (APV)

The 'Agency Payment Voucher' form is used by colleges and departments to pay for commodities and /or services previously ordered and received from vendors. It may use new or previously encumbered funds. Once completed and approved, the form is then sent electronically to the Controller's Office where it is uploaded into the Financial Information System (FIS). Concurrently, the originating Department / Organization will have the form signed by the responsible parties, and then forward it, along with required supporting documents, to the Controllers Office, ATTN: General Accounting, where further audits are made.

II. Rules for Agency Payment Vouchers

Use of the APV is required to pay for all goods received, services, equipment and capital outlay items.

Basic rules of purchasing apply as delineated in PPM Chapter.

Questions concerning the use of this form should be addressed to Controller's Office, Attn: General Accounting, 220 Anderson Hall. Phone 785-532-6202.

III. Completing an "Agency Payment Voucher Form".

A. Use the Controller's Office website http://www.ksu.edu/controller/. Click on Electronic forms. Your will be taken to the eForms eID login screen. Enter your campus eID and password. If you have not used the new eForms previously, you will have to set up a new user profile before you will be granted access to eForms. You will be taken to the correct location to begin setting up your eForms User Profile. You will need your Position number (not your employee ID number) to do this. See 'Setting Up an eForms Account' for additional information and assistance.

Once successfully logged on, you can go to the eForms menu to continue.

B. To create a new form click on 'Create New Form'; a dialog box will pop up. Mouse over and click on 'Savable Forms'.

C. Under the "Savable Forms" subdirectory, select the "Agency Payment Voucher" form hyperlink.

D. Fill out the information on each tab working from left to right as follows:

1. Header Information

a. User Number (Optional): Fill in your Department unique tracking number. This number will be shown on the Department Transaction Report available in FIS. The field is 6 characters in length and must be numeric.

b. Invoice Date: Initially set to the current date, this is the date of the invoice as provided by the vendor with the following caveats.

> (1) The field input must be in 'mm/dd/yyyy' format with the slashes. The 4 character year required. A calendar tool is available

Header Information					
User Number:					
Invoice Date:	4/21/2006 III (MM/DD/YYYY)				
Remittance Infor					
Check Type:	State				
Title:					
	Next				

by clicking on the calendar icon.

(2) For Grant project(s): This date should normally be the date that the supplier invoices the goods or services received. This date must fall between Start and End date of the award. Detailed instructions and examples covering this item were provided by Sponsored Projects to their specific Departmental Contacts. Specific questions on this should be addressed to Sponsored Projects, 785-532-6207.

(3) For non-grant projects: This date should normally be the date that the supplier invoices the goods (i.e. the invoice date from the bill) or that the services were received. At this time, no limitations exist on what date is place here. For multiple invoice Agency Payment Vouchers, select a date representative of the invoices being paid.

c. Remittance Info: Enter the account number and other identifying information that the *vendor* needs to properly apply this payment. This field is limited to 30 characters.

d. Check Type: Default is 'State' indicating Topeka payment. If payment is from other than a state check, select from the choices provided by the drop down box.

e. Title (Optional): Enter a short title to identify this Purchase Order (i.e.Computers). This block is for use in future eForms searches to assist you in locating these payment documents.

Once you have completed the above, click on the 'Next' button or the 'Vendor' tab.

2. Vendor Information

a. Initial Screen:

(1) If you know all the pertinent information you can type it in.

(2) If you do not know all of the information, click on the 'Search' button. A new dialog box will appear allowing you to search for a vendor by vendor name. See the instructions provided below.

(3) If this is a new vendor, click on the 'New Vendor' button. A new dialog box will appear allowing you to input certain information for a new vendor name. See the instructions provided below.

Ver	ndor Information
New Vendor	Edit Vendor Search
Vendor ID:	
Vendor Site ID:	
Payment Indicator	✓
Vendor No/Sfx	
Vendor Name	
Address:	
City:	
State:	
Zip:	-
Country:	
	Next

Once you have completed the above, click on the 'Next' button or the 'Agency' tab. b. Search Screen:

(1) The 'Search' button brings up the 'Search for Vendor' dialog box

		Search for Vendor	
By Name	~		Search

(2) Enter a portion of the desired name then 'click' on the Search button.

Search for Vendor				
By Name 👻 wally	Search			
No Vendor Found				

(3) Try a shorter version of your search criteria if your get an error.

(4) If you still are unable to find the vendor, and you are sure that the vendor exists in the STARS vendor tables (i.e. you have paid them before) contact the Controller's Office, General Accounting at 785-532-6202, and they will provide further assistance to you.

(5) If the vendor does not exist, click either the 'Back' button of your browser, or the 'Cancel' button of eForms. At this point you would need to select 'New Vendor' and continue.

(6) A find will provide another dialog box. Scroll through the list provided and click on 'Use' for the vendor and location you desire.

				Search for Vendor		
By N	By Name 🔽 wal-ma					
	Vendor Name	Vendor Number	Suffix	Street	City	
<u>Use</u>	WAL-MART STORES, INC.	XXXXX5188	00	628 TUTTLE CREEK BLVD	MANHATTAN	
<u>Use</u>	WAL-MART STORES, INC.	XXXXX5188	01	327 RED POWELL DR	DERBY	

(7) You will be returned to the original vendor screen where you can, by pressing the 'Edit Vendor' button, make any changes to the address information.

(8) If the vendor information is correct, click on the 'Next' button or the 'Agency' tab, otherwise continue with either editing the current vendor information or completing all required information for a new vendor.

(9) Should you have different address information on the vendor, click on the 'Edit Vendor' button.

c. Edit Vendor Screen:

(1) Pressing the 'Cancel Edit' button at ANY time removes any changes you have made and returns you to the original vendor screen.

(2) If you have gotten to this screen in error, press the 'Cancel Edit' button to return to the original vendor screen.

(3) Make any changes you need require. You can not change the Vendor ID or Vendor Site ID information.

(4) Once done, press the 'Next' button or the 'Agency' tab. Again, **if you press 'Cancel Edit' any changes you have made will be removed**.

Ver	dor Information
New Vendor	Cancel Edit Search
Vendor ID:	212733
Vendor Site ID:	257362
Payment Indicator	~
Vendor No/Sfx	XXXXX5188 00
Vendor Name	WAL-MART STORES, INC.
Address:	628 TUTTLE CREEK BLVD
	PO BOX 3649
City:	MANHATTAN
State:	KS
Zip:	66502 - 5854
Country:	
	Next

(5) There is an automated system in place to inform General Accounting, that you have changed an address. Continue to process your payment document as usual. Upon arrival at the General Accounting Office, the APV will be routed to the responsible individual who will ensure that the Vendor information is correct in FIS before releasing the form for further audit.

d. New Vendor Screen:

(1). The presented 'Vendor ID' and 'Vendor Site ID' fields are grayed out. The rest of the fields must be completely filled in for the new vendor account to be established.

(2). Payment Indicator: Department decides payment method:

(a) if Left blank: State of Kansas will mail the check directly to the vendor.

(b) if an "A": Check will be returned to the Controllers Office where either General Accounting or the Department can mail the check with supporting documents. If the Department wishes to send, prior coordination with General Accounting is required. (c). if an "X": Check will be Vendor Information

Cancel New Vendor

Edit Vendor

Vendor ID:

Vendor Site ID:

Payment Indicator

Vendor No/Sfx

Vendor Name

Address:

City:

State:

Zip:

Country:

electronically deposited directly from Topeka. An advice document is mailed to the vendor for travel reimbursements only.

(3). Vendor No/Sfx: Enter the vendor's FEIN or, if an individual, their SSN. This is limited to 9 numeric characters, no dashes, spaces or other special characters. Leave Suffix (Sfx) blank.

(4). Vendor Name:

(a) For a business address: Enter the full business name as shown on their invoice or other official company document (letterhead, business card, etc.).

(b) For an individual: Enter the person's full name in First Name, Middle Initial, Last Name order (i.e. John P Jones). No suffix information is retained (i.e. no need to put Jr., II, Doc, PhD, etc.)

(c). For an Individual's business using the owner's Social Security Number (and not an FEIN): Put the persons name first followed by "DBA" (Doing Business As) and then the Business Name. (This may have to go as the first line of the address currently)

(5). Address: If a Post Office Box (PO Box) is provided, use that (preference is to PO Box). If not, then complete street address to include Apartment, Suite, etc. must be entered.

(6). City: Enter the complete city name. No dashes or special characters are allowed.

(7). State: Enter the 2-digit Postal abbreviation.

(8). Zip Code: Enter the full 9 character zip code. Zip plus 4 is available at <u>www.usps.com</u>. If you are unable to determine the last 4 characters, leave the field blank.

(9). Country: Foreign vendor use only. If using a USA address, leave the field blank, otherwise use http://helpdesk.rootsweb.com/codes/ to get the correct abbreviation.

(10) Once you have completed all necessary entries, press 'Next' or the 'Agency' tab. Do NOT click on the 'Cancel New Vendor' button. Doing so will return you to a blank screen and none of your additions will be retained.

(11) There is an automated system in place to inform General Accounting that you have initiated a new vendor. Continue to process your payment document as usual. Upon arrival at the General Accounting Office, the APV will be routed to the responsible individual who will ensure that the Vendor information is correct in FIS before releasing the form for further audit.

3. Agency Information

Agency Information	
Department:	
Contact:	
Phone:	
Use Saved Information	
Next	This is th
	address that you

office

desire correspondence to be sent to.

a. Department: Provide sufficient information so that any correspondence will go to your department. The US Postal system, much less the General Accounting Section of the Controller's Office, is not able to route these without complete information.

b. Contact: Provide a Departmental contact name.

c. Phone: Enter the full phone number of the Contact Person in full 10-digit format.

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d. Used Saved Information button: If you saved your departmental information in your account setup, you can click this button and the eForms system will fill in the preceding items using that saved information. You can then go to each area and make any individual changes you need for this particular form. Use 'Shift-Tab' to go backwards through the boxes, Tab by it self to move you forwards through the boxes.

Once you have completed the entries, click on the 'Next' button or the 'Ship Add'[ress] tab.

4. Funding Information



a. This dialog box provides the building / editing tools to place up to 8 funding lines per page, with multiple pages automatically created as needed.

b. Order No and Line: If paying against funds previously encumbered, then these two fields combined provide the funding history used on the earlier encumbrance document. If you are using new funding (i.e. not previously encumbered) then leave these two fields blank.

(1) eForms does not 'pull' the funding information from the earlier encumbrance document but will compare the current document against the earlier encumbranced funding to ensure that the funding information is correct. If in error, you must correct it to save the funding line and proceed further.

(2) 'Order No' refers to the 'Document No.' given the original document. This will be a six digit number (i.e. 682676).

(3) 'Line' refers to the specific line of funding from that original encumbrance document and is entered as '01', '02', '03', etc.

b. Enter the amount to be charged to the account in dollars and cents format. No preceding dollar sign or 'comma' separators are allowed. Do separate dollars from cents using a period '.' though.

c. Enter the Project, Award / Source, Organization and Object and then press 'Save'.

d. The system will then validate your entry against various sources and, if an error is found, provide a dialog box providing additional information. Make the necessary changes and press 'Save' once again. Continue this process until no errors are noted.

e. At this point the system will redraw the screen showing you your add line as above but will also provide you your recently entered funding line(s) with an 'Edit' button available.

Funding Information					
Add Line:					
Order No Line Amount	Project	Award Source Org Object			
		Save			
Edit Line:					
Order No Line Amount	Project	Award Source Org Object Edit			
\$1.00	GXFS536884	BG6884 1340 35120 E2020 Save Cancel			
		Next			

f. Clicking on the 'Edit' button at the right of the particular funding line that you wish to edit will open up another dialog box where you can make desired changes.

Y Funding Information									
Add Line:									
Order No Line	Amount	1	Project	А	ward	Sourc	e Org	Object	
									Save
Edit Line:									
Order No Line	Amount	Project	Award	Source	Org	Object	Edit	Remove	
	\$1.00	GXFS536884	BG6884	1340	35120	E2020	Edit	Remove	
									Next

g. Make the desired changes and click 'Save' to save your changes. The system will then validate your entries to ensure that you have entered a valid account number and return you to the original view. If an error is detected, an error message will be shown and you will have to continue to correct until all errors are resolved.

h. Clicking on the 'Cancel' button will cancel any changes made since your last 'save'. Also, any changes made but not saved will be lost should you happen to click on the 'Next' button prior to saving.

i. Should you desire you can also cancel editing by clicking on the 'Cancel' button.

f. Continue to build your funding as needed.

Once you have completed the entries, click on the 'Next' button or the 'Purch' tab.

5. Purchasing Information

a. If needed fill in the requested information. These fields are free-form alpha-numeric fields.

b. 'Purchase Req' is where you would enter any Requisition number previously provided by the vendor or Kansas State University's Purchasing Office.

Purchasing Information		
Purchase Req:		
Contract #:		
	Next	

c. 'Contract #' is the place to enter the state contract number if such applies.

d. Once you have completed the entries, click on the 'Next' button or the 'Description' tab.

Description Information					
Page 1	Go to Page:	1 🔽			
Date	Invoice No	Quantity Unit	Unit Price	Amount	
		Description			

6. Description Information

a. This dialog box provides the building / editing tools to create a predefined number of description lines per page, with multiple pages automatically created as needed.

(1) The 'Page #' (Page 1 as shown above) indicates that you are on page one of these input screens, not page one of your APV as it will ultimately be printed. There are 10 of these input format series to a page; as you scroll down you will see ultimately reach the 10^{th} and then have to click on 'Add Page' to continue to the next 10.

(2) If you need to change something on a later page, use the 'Go to Page:' drop down to select the page you wish to go back (forward) to. If you only have 1 page, only page 1 will show in the drop-down.

(3) The eForms system will determine the pagination needed when rendering the final form(s).

b. The 'Date' and 'Invoice No' data fields are currently used for audit purposes by Sponsored Projects. Enter the actual invoice document date and number as provided by the vendor.

c. The 'Amount' is calculated for you using the entries made in the Quantity and 'Unit Price' sections. Use only dollars and cents for 'Unit Price'. If you need to delineate a price further, do so in the 'Description of Material' portion.

d. Enter the 'Quantity' received as whole or decimal portions. Do not enter fractions such as '1/4' or textual numbers such as 'five'.

e. Enter the 'Unit' of measurement. This is a drop down feature provides the units currently authorized for use. Should you need a unit of measure not currently provided, call General Accounting for further assistance in having that approved and provided.

f. Enter the 'Unit Price' or, if consolidated, a single price that is then broken out in the description section.

NOTE: As the 'amount' is computed, and presented in dollars and cents format (\$ 9.99 for example), the use of decimal values that result in more than two (2) decimal place answers will result in an error. If you must use prices or quantities that are of multiple decimal place significance, use the 'Description of Material' section to delineate this pricing. In the quantity block place a '1' and put the actual price paid in the unit price block.

g. Enter the 'Description of Material' in sufficient detail to describe the good or service that was purchased. This is a free-form block and allows for three (3) lines of text per item. If more space is needed, simply continue on to the next complete section leaving the Date, Quantity, Unit and Unit Price blank.

Once you have completed the entries, click on the 'Next' button or the 'Flags' tab.

7. Flags

Choose a maximum of three phrases to be stamped on your form

Expedite

An obligation of sponsored research project K.S.A. 76-752 and/or 76-770 exemptions apply.

Flags

Life expectancy of less than 1 year.

Affirmative Action Requirements have been met.

Claim is being submitted under statutory authority KSA-46-923. In order to avoid disruption of se processed now.

a. Mouse to the 'flag' that you require and click on the box to the left of that line. You are limited to a maximum of three (3) flags.

b. Note that these flags are not the same as those used on the Agency Purchase Order.

c. If there is a flag that you require, please advise the General Accounting Office. They are the approving authority for adding any to this list.

Once you have completed the entries, click on the 'Next' button or the 'Trustees' tab.

8. Trustees

Add Trustee	
No Trustees Found	
Next	

No trustees are necessary for this form. However, if you should happen to have any Position Trustees, they would be listed here at this time.

Once you have completed the entries, click on the 'Next' button or the 'Final Form' tab.

10. Final Form

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Two options are available – View Form and View Signature Sheet

a. 'View Form' is used to create the final "Agency Payment Voucher" and ultimately print it. Created using Adobe Acrobat's .pdf format, a 'pop-up box' is generated and the final form is displayed. From this display you can review your form, and print it if ready.

b. A 'watermark' will be displayed on this displayed form if your form is 'Out of balance'. To correct an out of balance situation you will have to close this box ('X' out) and then go back to either the 'Funding' or 'Description Information' (or both) tabs and make the necessary corrections. Once the 'Out of balance' situation has been resolved, go back and view the form once again.

c. The 'View Signature Sheet' is provided to print a simple form that you may use to acquire approval signatures should your Department / Organization require such. It is for your use only and does not need to be sent to the Purchasing Office.

E. **Form Completion**: Once you have completed the form, have printed the necessary copies, and are finished, click the 'Finished' button on the left screen column. This will return you to the original menu where you can select your next action.

IV: Questions and comments

Address any questions, comments, or suggestions for training to the Controllers Office, ATTN: General Accounting, 220 Anderson Hall, or call 785-532-6202.