


Guidelines for Check Request

	<h2 style="margin: 0;">CHECK REQUEST</h2>	<h2 style="margin: 0;">CK</h2>					
<p>NOTE: - UAS requires submittal of original receipts or invoice. All new vendors must complete the Payee Data Record Form. - Please allow 5-10 business days for check request to be processed for payment. - A person may not be both a payee and an authorized signer. In this case, the check request must be approved by payee's supervisor.</p> <p style="text-align: right;">Click Here for Payee Data Record Form</p>							
Payee Information:		Requested By:					
Vendor/Payee:		Requester Name:					
STREET		Dept./Room No:					
CITY	STATE	Phone/Ext.:					
ZIP		Date:					
IS THE PAYEE A CAL STATE LA EMPLOYEE? <input type="checkbox"/> Yes <input type="checkbox"/> No		IS THE PAYEE A UAS EMPLOYEE? <input type="checkbox"/> Yes <input type="checkbox"/> No					
		IS THE PAYEE A US CITIZEN? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If you have already filled a Payee Data Record Form please proceed. If you have not, click the link at the top of the page labeled "Payee Data Record Form"							
If this is a Rush request mark the box and indicated date needed <input type="checkbox"/> Date needed: _____							
<i>(Additional fee may apply)</i>							
Description	Project	Invoice Number	Account	Fund	Dept.	Amount	1088
						\$	
▶							
TOTAL						\$ 0.00	
UAS Use only - Accounting Department Coding							
SUPID:		Payee Data Record Form on File?		<input type="checkbox"/> Corp. <input type="checkbox"/> Sole		Invoice Date:	
Desc.		Invoice No.				Due Date:	
Audited by:							
Remarks:							
Sample authorized signatures must be on file at UAS corporate office and agree with the signatures on the request.							
Authorized Signatures							UAS Approval
I certify that the expenses incurred are for bona fide business purposes, and the information provided is true and accurate. I certify that the expenditures benefit the educational mission of the CSU as defined by the respective statutes, Board of Trustees policies, campus policy, and UAS policy, and that all items are for official business and include no personal expenses. I certify that the above payments, if made to a student, are NOT contingent upon teaching, research, or any other service performed by the student and that each recipient has been notified of the potential tax liability for any amount in excess of tuition/fees, books, supplies, and equipment for courses or instruction.							
(Input PI/Program Director Name)							
Name of authorized signer (Type or Print)				Signature		Date	
(Input Resource Manager Name)						Approved by	
Name of authorized signer (Type or Print)				Signature		Date	
						Date	

Form filler should input the information that is highlighted in yellow.

STEPS:

1. Fill out the “Requested By” information. This allows UAS to contact you if there are questions about or discrepancies in the Check Request.
2. Input all the fields for the “Payee Information.”
 - This can be a Vendor you are trying to pay – please include all their information and ensure a “Payee Data Form” is completed so they are in the UAS system.
 - This can also be personal information if you are using this form to complete a reimbursement for you or someone else.
3. Please select whether you are a “CAL STATE LA EMPLOYEE”, “UAS EMPLOYEE” and “US CITIZEN”.
 - If this is for a vendor check “No” for CAL STATE LA EMPLOYEE and UAS EMPLOYEE, but “Yes” for US CITIZEN
4. Add the Check Request information like “Description”, “Project”, “Invoice Number”, “Account”, “Fund”, “Department” and “Amount”.
 - Work with UAS Grant Analyst to get Project information and account numbers.
 - Some of the common account numbers that are used are:
 - 660003 – Supplies and Services
 - 622001 – Course Materials
 - Project and Invoice Number might not be applicable depending on the Project and if the invoice/receipt has a number.
 - You can use more than one line on the Check Request if there are multiple invoices or receipts.
 - If there is another Invoice but you want the funds to be charged from a different project, please complete a separate Check Request
5. Upon submission of the AdobeSign Webform, you will be asked to provide the Principal Investigator/Program Director of the Grant

	<p>name and email. Note that if the check is being requested for the the Principal Investigator/Program Director, their supervisor information (e.g.: Dean, if Chairs or Directors, Chair, if Faculty).</p> <ol style="list-style-type: none">6. Form is automatically routed to UAS.7. There is a sample on the next page for your reference.
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