


UAS Payment Request Form Guidelines

		PAYMENT REQUEST FORM					
<p>NOTE: - UAS requires submittal of receipts, invoices, and/or supporting documents when requesting for payment. - Please allow 10-15 business days for payment requests to be processed for payment. New Payees must complete a Payee Data Record Form, send form with supporting documents to uasap@calstatela.edu. - A person may not be both a payee and authorized signer. In this case, the payment request must be approved by payee's supervisor.</p>							
		Click Here for Payee Data Record Form					
Payee Information:		Requested By:					
VENDOR/PAYEE:		Requester Name:					
STREET		Dept./Room No:					
CITY	STATE	ZIP	Phone/ Ext.:				
EMAIL		Date:					
SUPPLIER ID:		Email:					
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 this is a Rush request mark the box and indicated date needed <input type="checkbox"/> Date needed: _____							
<i>(Additional fee may apply)</i>							
Description	Invoice Number	Account Number	Fund	Dept.	Project ID	Amount	1099
						\$	
TOTAL						\$ 0.00	
UAS Use Only - Accounting Department Coding							
SUPID:				Due Date:			
Desc.							
Audited by:							
Remarks:							
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 expense. 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.							
PI of Grant							
Name of authorized signer (Type or Print)				Signature		Date	
Resource Manager						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 Payment Request Form.
2. Input all the fields for the “Payee Information.”
 - a. 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.
 - i. For Vendors, please input the “Supplier ID” as well
 - b. 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”.
 - a. If this is for a vendor check “No” for CAL STATE LA EMPLOYEE and UAS EMPLOYEE, but “Yes” for US CITIZEN
4. Add the Payment Request Form information like “Description”, “Project”, “Invoice Number”, “Account”, “Fund”, “Department” and “Amount”.
 - a. Work with UAS Grant Analyst to get Project information and account numbers.
 - b. Some of the common account numbers that are used are:
 - i. 660003 – Supplies and Services
 - ii. 622001 – Course Materials
 - c. Project and Invoice Number might not be applicable depending on the Project and if the invoice/receipt has a number.
 - d. You can use more than one line on the Payment Request Form if

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	<p>there are multiple invoices or receipts.</p> <ol style="list-style-type: none">i. If there is another Invoice but you want the funds to be charged from a different project, it can be on the same Payment Request Form if the Vendor is the same and it gets the approvals of the PI(s) of the funds. <ol style="list-style-type: none">5. Upon submission of the Adobe Sign Webform, you will be asked to provide the Principal Investigator/Program Director of the Grant name and email. Note that if the check is being requested for the Principal Investigator/Program Director, their supervisor information (e.g.: Dean, if Chairs or Directors, Chair, if Faculty).6. Form is automatically routed to UAS.7. There is a sample on the side for your reference.
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