

HOW TO FILL OUT THE PAYMENT REQUEST FORM

The Payment Request Form is located at www.oaklandedfund.org/forms.

This form requires you to upload copies of the invoice you wish to pay or receipts you wish to be reimbursed for. Please be sure you have these before beginning the form.

Please see the end of this guide for the check disbursement schedule.

STEP 1

Your Role:
Preparer (Person preparing the form)

Your Name:

Your Email:

Please provide information for any other signers needed for this document.

Role:
Project Administrator (Approver)

Name:

Email:

Your name
and email

Name and
email of
approver

On the first page, enter your name and email address, as well as the name and email address of the person who can approve the purchase or reimbursement. This is usually the principal of your school, executive director of your organization, or department head.

Then, click the “Begin Signing” button.

STEP 2

Please Review & Act on These Documents

 **David Korsak**
Oakland Public Education Fund

 OAKLAND
PUBLIC EDUCATION FUND
Powered by  DocuSign

PRIVATE MESSAGE: To expedite processing of your request be sure to attach any copies of documentation required in the form. Please make sure the uploaded documents can be read. Please make sure to select the appropriate codes for the [View More](#)

 Please read the [Electronic Record and Signature Disclosure](#).

I agree to use electronic records and signatures.

OTHER ACTIONS

Approve the use of DocuSign

Click "Continue"

Next, click the checkbox to agree to use DocuSign. Then, click the “Continue” button to access the form.

STEP 3

Select, "reimbursement" or "invoice"

PAYMENT TYPE		DISTRIBUTION METHOD	
I would like to	<input type="text" value="-- select --"/>	Please have my check	<input type="text" value="-- select --"/>

Select, "Mail" or "Hold"

On the first page, select from the first drop down whether you would like to pay an invoice or request reimbursement. In the next box, select whether you would like the check to be mailed to the address provided or held for pick up at the Ed Fund office.

STEP 4

PAYEE INFORMATION			
Name	<input type="text"/>	Address	<input type="text"/>
Phone	<input type="text"/>	Email	<input type="text"/>

Enter the name, address and contact information for the payee

Next, enter the name and mailing address of the payee. Please note: if you chose to have the check mailed, the address entered here is where the check will be mailed. Then, enter the phone number and email address of the payee. (If either of these are unknown, enter "n/a".)

If you wish to communicate any special circumstances or provide more information about your request, use the section titled "Notes or Special Instructions" on the bottom of the first page.

STEP 5

PROJECT NAME	
Use the dropdown to select your project, program, or school site. If you don't see your project, please select "Other" and write it in the text field.	
Fund	<input type="text" value="-- select --"/>

Enter your school or project name

On the second page, select the name of your school or project from the "Fund" drop down. This indicates the account you wish to draw funds from to support your payment request.

If the fund you wish to select is not listed on the drop down, select “Other”. Then, enter the name of your school or project in the field that populates next to the drop down.

STEP 6

Enter the details of the purchase/reimbursement

Date	Account	Funder	Project	Description	Amount
<input type="text"/>	-- select --	-- select --	-- select --	<input type="text"/>	<input type="text"/>
<input type="text"/>	-- select --	-- select --	-- select --	<input type="text"/>	<input type="text"/>
<input type="text"/>	-- select --	-- select --	-- select --	<input type="text"/>	<input type="text"/>

Next, enter the details of the purchase/reimbursement request. If submitting a reimbursement request, enter the details of each receipt as a separate line item. If submitting a payment request, enter the details of each invoice as a separate line item. Up to eleven line items may be entered per form. If you require more lines, please fill out an additional form.

Please reference the key below to help fill out each column.

Date: The date the expense was incurred or the date of the invoice.

Account: The type of expense (ex: supplies, field trips, printing and copying, etc.).

Funder: If you have a specific grant that supports this purchase, enter the name of the grantor organization here.

Project: (optional) The specific project this invoice or purchase is related to.

Description: Details about the invoice or purchase.

Amount: The cost of the invoice or total of the receipt.

STEP 7

Upload invoice or proof of purchase



If you are submitting this form to pay an invoice, please upload a copy of the invoice you would be paid.

If you are submitting this form to be reimbursed, please upload copies of your receipts (or other documentation) to show proof of purchase.

Please make sure your scanned documentation is clear and shows the name of the vendor, amount of expense, items requested/purchased, and the date and time of the expenditure. Documentation not meeting these standards cannot be accepted.

Signature		Click to electronically sign		
Form prepared by	Bridget	Date	October 31, 2017 11:57:54 AM PDT	

On the third page, click the paper-clip button and follow the steps to upload a copy of each invoice or receipt listed on the previous page.

Next, click the “Sign” button to electronically sign the form. If this is your first DocuSign form, please confirm your name, initials, and signature style, then click “Adopt and Sign.”

Adopt Your Signature

Confirm your name, initials, and signature.

* Required

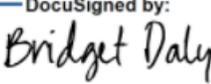
Full Name* Confirm your name and initials

Initials*

Select Style Draw

PREVIEW

DocuSigned by:



519A4B31EF6140A...

DS



By selecting Adopt and Sign, I agree that the signature and initials will be the electronic representation of my signature and in my agent) use them on documents, including legally binding contracts - just the same as a pen-and-paper signature or initial.

ADOPT AND SIGN

←
Click to approve

STEP 8

Done! Select Finish to send the completed document.

FINISH

OTHER ACTIONS

Finally, review the form and click the “Finish” button in the top right corner of the screen.

Congratulations! Your form is now complete and will be sent to your approver to review. Once approved, the form will be sent to the Ed Fund and the check will be cut according to the following disbursement schedule:

Forms Approved...	...Will have their check cut by...
Before 12pm Monday	Next Friday by 2pm
After 12pm Monday	The Friday of the next week by 2pm

If you have questions about how to complete this form or the status of a submitted form, please contact Vivian Bueno at vivian@oaklandfund.org.