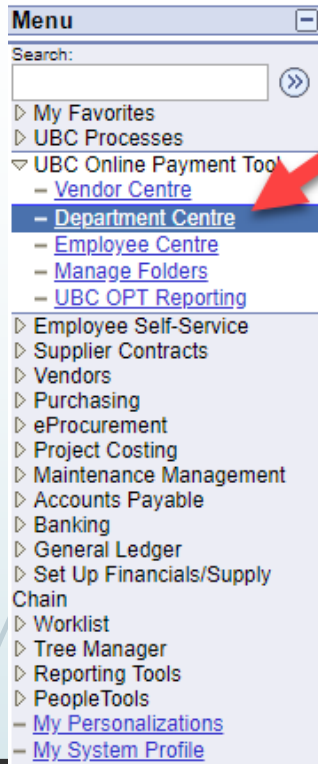




# Vendor Payments

Faculty of Education

\*This manual is intended to be used for Faculty of Education only for Training purposes  
June 2018



## UBC Department Reimbursement and Payment Centre



### [My Worklist](#)

Work the items that have been routed to you.



### [Request for Reimbursement and Payment](#)

Goods and Services Reimbursements and Travel Reimbursements



### [Evaluate a Reimbursement Request](#)

Participate in the approval process for a reimbursement request. This link allows you to search for the request you want.



### [Update or Withdraw a Reimbursement and Payment Request](#)

Update or withdraw a previously submitted reimbursement request.



### [View a Reimbursement and Payment Request](#)

View a recently submitted reimbursement request. This is a read-only view.



### [Reconcile UBC VISA Card transactions](#)

Reconcile UBC VISA Card transactions.



### [Update or Withdraw a UBC VISA Card reconciliation transaction](#)

Update or withdraw a previously submitted UBC VISA Card reconciliation transaction.



### [Evaluate a UBC VISA Card reconciliation transaction](#)


Participate in the approval process for a VISA card reconciliation transaction. This link allows you to search for the request you want.



### [View a UBC VISA Card reconciliation transaction](#)

View a recently submitted UBC VISA Card reconciliation transaction. This is a read-only view.

1. Open "UBC Online Payment Tool" in FMS
2. Click "Request for Reimbursement and Payment" under "Department Centre"



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## UBC Department Reimbursement and Payment Requests

What type of Payment Request would you like to submit?



[Goods and Services Expense Reimbursement](#)

Initiate a request for goods and services reimbursement.



[Travel Expense Reimbursement](#)

Initiate a request for travel reimbursement.

Click "Goods and Services Expense Reimbursement" for non-travel expenses



...When Quality Matters

Unit #1, 9761 - 192nd Street, Surrey, B.C. V4N 4C7  
www.laservalley.com

ACCOUNT NO.	INVOICE NO.
EDU006	301729

**SOLD TO**  
 UBC FACULTY OF EDUCATION  
 DEAN'S OFFICE  
 2616 - 2125 MAIN MALL.  
 VANCOUVER, BC  
 CANADA  
 V6T 1Z4

**SHIP TO**  
 UBC FACULTY OF EDUCATION  
 DEAN'S OFFICE  
 2616 - 2125 MAIN MALL.  
 VANCOUVER, BC  
 CANADA  
 V6T 1Z4

INVOICE DATE	ORDER NUMBER	CUSTOMER REF.	DATE SHIPPED	PLEASE PAY THIS AMOUNT
05/18/2018	221720	RACHAEL	05/18/2018	\$65.47

ACCOUNT NUMBER	INVOICE NUMBER	INVOICE DATE	PAYMENT TERMS	YOUR REF or (P.O. NUMBER)
EDU006	301729	05/18/2018	NET 15 DAYS	

Qty Order	Qty Ship	Qty B/O	Description Serial Numbers	UNIT PRICE	EXTENDED PRICE
1.00	1.00	0.00	Z25 DR420 BROTHER DR420/DR450 COMPATIBLE DRUM	55.46	55.46
1.00	1.00	0.00	A01 FSC ENVIRO FEE	3.00	3.00

Ok to pay  
 name, signature,  
 date

LL			SUBTOTAL	\$58.46	
CUSTOMER PST#:			GST/HST	\$2.92	
CUSTOMER GST #:			PST	\$4.09	
YOUR SALES REPRESENTATIVE LUKE					
PAGE 1			GST# R132369323		
<b>INVOICE</b>	LASER VALLEY TECHNOLOGIES CORP. UNIT 1 - 9761 - 192nd STREET, SURREY, BC CANADA V4N 4C7 Tel: (604) 888-7085 Fax: (604) 888-7095			<b>TOTAL</b>	65.47

Review invoice details; obtain either Head/Admin Manager's signature or email confirmation

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## Create a Reimbursement or Payment

### Smart Search

Before you begin, please ensure that you know your SpeedCharts and that you have scanned your supporting documents.

You can save scans to your desktop, or use your smart device to take photos and email them to [OPT.docs@ubc.ca](mailto:OPT.docs@ubc.ca). There are PRECISE requirements for the SUBJECT line; please consult the FAQ and Learning Resources for more information.

Enter the Payee name in the Name field below. A partial name will suffice. You can search for Employee ID prefixed by E; student ID prefixed by S; and Vendor ID. Note that Employee ID prefixed by E is limited to those employees who have given you entry delegate access.

### Search Fields

Name	GST# / Business#	
<input type="text" value="LASER VALLEY TECHNOLOGIES"/>	<input type="text"/>	<a href="#">Vendor Search Tips</a>

Enter last name, first name (e.g. Smith, John) NO SPACE AFTER THE COMMA; or last name (e.g. Smith); or name of company (e.g. Fisher Scientific) and then click Search or press Enter.

Vendor ID  ShortName

Country

Address

City  Province  Postal Code  Country must be selected before a Province

Search Results				
Name	Address			
Vendor ID	ShortName	Name	Status	Location
0000194230	LASVAL-002	LASER VALLEY TECHNOLOGIES CORPORATION	Approved	CADMAIN

[FAQ and Learning Resources](#) [Email for Help](#)

1. Enter vendor name and click "Search"

2. Select the vendor that populates at the bottom of the page

Provide a general reason for the payment

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## Create a Reimbursement or Payment

### Step 1 of 6: Select a Folder

Folders provide the capability to organize a group of payments. If you choose to use a folder you can add a new one; or if you have already created folders you can link this new eForm to one of those folders by selecting the folder here.

Payee		
Payee:	0000194230	LASER VALLEY TECHNOLOGIES CORPORATION
Payment Method:	Direct Deposit	UNIT 1-9761 192ND STREET
eForm ID:	303348	SURREY, BC V4N 4C7
Requested Date:	05/31/2018	

Field labels prefixed with \* indicate required fields.

Payment Reason
*Please supply a reason for this payment:
<input type="text" value="DNSO cartridge purchase"/>

Payment Currency
*Payment Currency: <input type="text" value="CAD"/> Canadian Dollar

Folder Use
*Use a folder for this request? <input type="text" value="No"/>

<a href="#">Previous</a>	<a href="#">Next &gt;&gt;</a>
<a href="#">&lt;&lt; Search</a>	<a href="#">Close</a>

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## Create a Reimbursement or Payment

### Step 2 of 6: Copy Prior Request

Most users should select 'No' and click Next.

Copying a prior request can save time for direct vendor payments. It allows the user to reuse values for items such as SpeedChart/Account distributions, or categories.

Payee		
Payee:	0000194230	LASER VALLEY TECHNOLOGIES CORPORATION
Payment Method:	Direct Deposit	UNIT 1-9761 192ND STREET
eForm ID:	303348	SURREY, BC V4N 4C7
Requested Date:	05/31/2018	
Payment Reason:	DNSO cartridge purchase	

Field labels prefixed with \* indicate required fields.

Copy Prior Request	
*Copy data from a prior request?	<input type="text" value="No"/>

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Ignore the "Copy Prior Request" section and continue to the next page

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## Create a Reimbursement or Payment

### Step 3 of 6: Transaction Details

Enter your Invoice Details below and click Apply. Then fill in Distribution and click Next.

Under Distribution, leave the Program field blank unless otherwise directed by your department financial officer.

#### Payee

Payee: 0000194230 LASER VALLEY TECHNOLOGIES CORPORATION  
 Payment Method: Direct Deposit UNIT 1-9761 192ND STREET  
 eForm ID: 303348 SURREY, BC V4N 4C7  
 Requested Date: 05/31/2018  
 Payment Reason: DNSO cartridge purchase

Field labels prefixed with \* indicate required fields.

[UBC FIA Policy](#)

#### Invoice Details

\*Invoice: 301728 \*Gross Invoice Amount: \$65.47 CAD \*Same SpeedChart: Yes  
 \*Invoice Date: 05/18/2018 \*Tax Method: GSTPST \*SpeedChart Key: LWMV  
 Tax Amount: \$7.01 \*The amounts below include tax.

#### Distribution

*SeedChart	Fund	Department	Project	Program	*Account	Description	Distrib Percent	Amt After Tax	*Tax Code	Tax Amount	All ID
1 LWMV	G0000	150100	15G22102		640000	Operational supplies & expense	100.0000	65.47	GSTPST	7.01	

Computed Net Amount: \$58.46 Amount Diff: 0.00  
 Computed Tax Amount: \$7.01 Tax Diff: \$0.00

[FAQ and Learning Resources](#) [Email for Help](#)

1. Fill under "Invoice Details":

- a. Invoice number
- b. Invoice date
- c. Gross invoice amount
- d. Tax method
- e. Speedchart details
- f. Whether amounts include or exclude tax

2. Press "Apply"

3. Fill under "Distribution":

- a. Account code
- b. Distribution percentage

4. Click "Calculate"



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## Create a Reimbursement or Payment

### Step 4 of 6: Special Handling

Faculty and Staff are reimbursed through Direct Deposit only.

Other vendors may be paid through EFT, Cheque, or Bank Draft.

#### Payee

Payee:	0000194230	LASER VALLEY TECHNOLOGIES CORPORATION
Payment Method:	Direct Deposit	UNIT 1-9761 192ND STREET
eForm ID:	303348	SURREY, BC V4N 4C7
Requested Date:	05/31/2018	

Payment Reason: DNSO cartridge purchase

Field labels prefixed with \* indicate required fields.

#### Special Handling

##### Payment Method

Vendors outside of Canada and USA should be paid using a Wire Transfer. Employees will be reimbursed through direct deposit whenever possible.

Do you need a different payment method?  (Invalid Value)

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Confirm the payment method (System will default to either cheque or direct deposit)

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### Create a Reimbursement or Payment

Step 5 of 6: Attach supporting documents and certify

You may attach documents emailed to OPT.docs@ubc.ca and/or documents from your Desktop.

Please note the following:  
 -After clicking "Retrieve unattached", it may take a few minutes for the Unattached Items list to populate. Please be patient.  
 -You will need to allow pop-ups in your browser to view your attachments.

**Payee**

Payee:	0000194230	LASER VALLEY TECHNOLOGIES CORPORATION
Payment Method:	Direct Deposit	UNIT 1-9761 192ND STREET
eForm ID:	303348	SURREY, BC V4N 4C7
Requested Date:	05/31/2018	
Gross Amount:	65.47	CAD Canadian Dollar

Field labels prefixed with \* indicate required fields.

**Retrieve Unattached**

Attach	Detach	View	Attachment Title	Received
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**1 Attachments**

Browse	View	Description	Attached File	Date
<input type="checkbox"/>	<input checked="" type="checkbox"/>		Laser_Valley_-_301729.pdf	

**2 Form Messages**

Message Text	Description
<input checked="" type="checkbox"/> Certification Signature	I certify that the information entered above is true and complete, and that the payments or expenses reported herein comply with UBC policies and the sponsors or donor terms and conditions where applicable. I further certify that this claim is related to UBC business and I will not claim the expense from other sources.

**3 Comments**

Your Comment:

Comment History:

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[FAQ and Learning Resources](#)    [Email for Help](#)

1. Attach copy of invoice in "Attachments" section (if invoice approved via email - attach email approval)

2. Check the "Certification Signature" box

3. Add general comments in comment box for communication to the next approver

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## Create a Reimbursement or Payment

Authorized by

**Step 6 of 6: Verify approvers and submit claim**  
 Verify that your approvers are correct and click 'Submit'.

If a one-over approver is required and the person shown is incorrect, you may search and select a new approver. The original one-over approver will receive an email indicating the override.

Payee		
Payee:	0000194230	LASER VALLEY TECHNOLOGIES CORPORATION
Payment Method:	Direct Deposit	UNIT 1-9761 192ND STREET
eForm ID:	303348	SURREY, BC V4N 4C7
Requested Date:	05/31/2018	

Field labels prefixed with \* indicate required fields.

Approvers					
Approval Step	Approval Rank	Approver Category	Operator ID	Name	Approval Error(s)
2	DeptAdm	Primary		Park,Seoung Hun Sean	
2	DeptAdm	Secondary		Smith,Rachael Ayano	
2	DeptAdm	Secondary		Mahmood,Ayaz	
2	DeptAdm	Secondary		Ng,Clara Pui Ki	
3	FMS SgnAut	Primary		Mahmood,Ayaz	
3	FMS SgnAut	Secondary			
3	FMS SgnAut	Secondary			
3	FMS SgnAut	Secondary			

**Message**

Review the next approver and click "Submit"

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## Create a Reimbursement or Payment

### Step 6 of 6: Result

Review your form status below. Print this page and attach your physical receipts. Please consult your Department Financial Administration for storage requirements.

Note your eForm ID. You may check this page at a later date to review the progress of this transaction. If you need to update or withdraw your eForm, including submitting an eForm on Hold, visit the Update/Withdraw a Request link in the OPT Employee Centre.

#### Payee

Payee:	0000194230	LASER VALLEY TECHNOLOGIES CORPORATION
Payment Method:	Direct Deposit	UNIT 1-9761 192ND STREET
eForm ID:	303348	SURREY, BC V4N 4C7
Requested Date:	05/31/2018	

Field labels prefixed with \* indicate required fields.

#### Form Status

**You have just SUBMITTED this form. This action passed the form to Financial Officer for further processing.**

#### Process Visualizer



[Go To Worklist](#)

[View This Form](#)

[Close This Form](#)

Submission confirmation appears, with options to view the eForm, close the eForm or go to the worklist

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## View a Reimbursement or Payment

### Step 1 of 2: Transaction Summary

You are not able to change any data elements on this page.

Payee		
Payee:	0000194230	LASER VALLEY TECHNOLOGIES CORPORATION
Payment Method:	Direct Deposit	UNIT 1-9781 192ND STREET
eForm ID:	303348	SURREY, BC V4N 4C7
Requested Date:	05/31/2018	
Payment Reason:	DNSO cartridge purchase	

Field labels prefixed with \* indicate required fields.

Generated Voucher	
Business Unit:	Voucher ID:

Invoice Details				
Invoice:	301728	Gross Invoice Amount:	\$65.47 CAD	Same SpeedChart: Yes ▼
Invoice Date:	05/18/2018	Tax Method:	GSTPST ▼	SpeedChart Key: LWMV
		Tax Amount:	\$7.01	The amounts below include tax: ▼

Distribution											
SpeedChart	Fund	Department	Project	Program	Account	Description	Distrib Percent	Amount	Tax Code	Tax Amount	Alt ID
1 LWMV	G0000	150100	15G22102		640000	Operational supplies & expense	100.0000	65.47	GSTPST ▼	7.01	
Computed Net Amount:			58.46	Amount Diff:		0.00					
Computed Tax Amount:			\$7.01	Tax Diff:		\$0.00					

Special Handling	
▼ Payment Method	
Vendors outside of Canada and USA should be paid using a Wire Transfer. Employees will be reimbursed through direct deposit whenever possible.	
Do you need a different payment method?	No ▼ (Invalid Value) ▼

Attachments			
View	Description	Attached File	Date
1 <a href="#">View</a>	Laser_Valley_-_301729.pdf	Laser_Valley_-_301729.pdf	05/31/2018

Comments
Comment History:
** Smith, Rachael Ayano ** Thu, May 31 18, 08:59:32 AM DNSO printer cartridge purchase

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Viewing the eForm :  
provides summary of the eForm  
submitted to the next approver