MANUAL CHECK REQUEST (MW)

State of Louisiana

ISIS MW-1 (7/98)

PAGE	OF

SEND TO: Office of Statewide Reporting & Accounting Policy

Circle one: CHECK   NO CHECK   OR   WIRE TRANSFER

DOCUMENT #

REQUESTING AGENCY NAME   #

CHECK #

MW DATE: / /	ACCT PRD: /	BUDGET FY:

ACTION:	RECEIVING FD:	BANK ACCT CODE:	CASH ACCT:

VENDOR CODE:	VENDOR NAME:

REMARKS:	VENDOR ADDRESS:
	DOCUMENT TOTAL:

REFERENCED DOCUMENT(S)

CD	AGY	Number	LN	Invoice	Fund	AGY	Orgn	Sub Org	Appr	Activity

Function	Object	Sub Obj	Rev Src	Sub Rev	Job No	Rpt Cat	BS Acct	Act Del Date

Description	Quantity	Amount	I/D	P/F
		$		

REFERENCED DOCUMENT(S)

CD	AGY	Number	LN	Invoice	Fund	AGY	Orgn	Sub Org	Appr	Activity

Function	Object	Sub Obj	Rev Src	Sub Rev	Job No	Rpt Cat	BS Acct	Act Del Date

Description	Quantity	Amount	I/D	P/F
		$		

REFERENCED DOCUMENT(S)

CD	AGY	Number	LN	Invoice	Fund	AGY	Orgn	Sub Org	Appr	Activity

Function	Object	Sub Obj	Rev Src	Sub Rev	Job No	Rpt Cat	BS Acct	Act Del Date

Description	Quantity	Amount	I/D	P/F

Prepared by:	Date:	
Approved by:	Date:	Phone:
OSRAP Approval:	Date:	Phone:
State Treasury Approval	Date:	

MANUAL CHECK REQUEST (MW)

State of Louisiana

ISIS MW-1 (7/98)

PAGE (1)　　OF

SEND TO: Office of Statewide Reporting & Accounting Policy

(2)　Circle one:　　CHECK　　NO CHECK　　OR　　WIRE TRANSFER

STATE TREASURY USE ONLY (3)
DOCUMENT #
CHECK #

REQUESTING AGENCY NAME　(4)　　　　　　　　　# (5)

MW DATE: (6) / /	ACCT PRD: (7) /	BUDGET FY: (8)

ACTION: (9)	RECEIVING FD: (10)	BANK ACCT CODE: (11)	CASH ACCT: (12)

VENDOR CODE: (13)	VENDOR NAME: (14)

REMARKS: (16)	VENDOR ADDRESS: (15)
	DOCUMENT TOTAL: (17)

REFERENCED DOCUMENT(S)

CD	AGY	Number	LN	Invoice	Fund	AGY	Orgn	Sub Org	Appr	Activity
(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)
Function	Object	Sub Obj	Rev Src	Sub Rev	Job No		Rpt Cat	BS Acct	Act Del Date	
	(29)	(30)	(31)	(32)	(33)		(34)	(35)	(36)	

Description		Quantity		Amount			I/D	P/F
(37)		(38)		$　(39)			(40)	(41)

REFERENCED DOCUMENT(S)

CD	AGY	Number	LN	Invoice	Fund	AGY	Orgn	Sub Org	Appr	Activity
(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)
Function	Object	Sub Obj	Rev Src	Sub Rev	Job No		Rpt Cat	BS Acct	Act Del Date	
	(29)	(30)	(31)	(32)	(33)		(34)	(35)	(36)	

Description		Quantity		Amount			I/D	P/F
(37)		(38)		$　(39)			(40)	(41)

REFERENCED DOCUMENT(S)

CD	AGY	Number	LN	Invoice	Fund	AGY	Orgn	Sub Org	Appr	Activity
(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)
Function	Object	Sub Obj	Rev Src	Sub Rev	Job No		Rpt Cat	BS Acct	Act Del Date	
	(29)	(30)	(31)	(32)	(33)		(34)	(35)	(36)	

Description		Quantity		Amount			I/D	P/F
(37)		(38)		$　(39)			(40)	(41)

Prepared by: (42)	Date: (42)	Phone: (42)
Approved by: (43)	Date: (43)	Phone: (43)
OSRAP Approval: (44)	Date: (44)	(44)
State Treasury Approval (45)	Date: (45)	(45)

MANUAL CHECK REQUEST (MW)
(EXAMPLE A)

Instructions for completing a request for a manual check when a GFS payment document (PV, P1, QV) was previously processed. When filling out this form, use the number of accounting lines required to complete the payment.

FIELD	FIELD NAME	FIELD DESCRIPTION
1	PAGE	REQUIRED. Enter the page number for this manual check request as needed.
2	CHECK OR NO CHECK OR WIRE TRANSFER	REQUIRED. Circle the "Check" field to indicate that this manual check request will result in a manual check.
3	STATE TREASURY USE ONLY	LEAVE BLANK.
4	REQUESTING AGENCY NAME	REQUIRED. Enter the name of the agency initiating this manual check request.
5	AGENCY NUMBER	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency number of the agency initiating this manual check request.
6	MW DATE	LEAVE BLANK.
7	ACCTG PRD	REQUIRED. Field length 4. Data type: numeric. Enter the accounting period to be used for this manual check request.
8	BUDGET FY	REQUIRED for capital outlay appropriations. LEAVE BLANK for regular appropriations. Field length 2. Data type: numeric. Enter the budget fiscal year to be used for this manual check request.
9	ACTION	LEAVE BLANK.
10	RECEIVING FUND	LEAVE BLANK.
11	BANK ACCT CODE	REQUIRED. Field length 2. Data type: alphanumeric. Enter the bank account code of the account from which the check will be issued for this manual check request.
12	CASH ACCT	LEAVE BLANK.
13	VENDOR CODE	REQUIRED. Field length 11. Data type: alphanumeric. Enter the vendor code to be used for this manual check request.

FIELD	FIELD NAME	FIELD DESCRIPTION
14	VENDOR NAME	REQUIRED. Field length 30. Data type: alphanumeric. Enter the vendor name to be used for this manual check request.
15	VENDOR ADDRESS	REQUIRED. Enter the vendor address to be used for this manual check request.
16	COMMENTS	OPTIONAL. Field length 12. Data type: alphanumeric. Enter a brief description about this manual check request as needed.
17	DOCUMENT TOTAL	REQUIRED. Field length 14. Data type: numeric. Enter the total of all lines on this manual check request. This amount must include cents.
18	REFERENCED DOCUMENTS(S) CD	REQUIRED. Field length 2. Data type: alphabetic. Enter the PV transaction code for this manual check request line. This code is always "PV".
19	REFERENCED DOCUMENTS(S) AGY	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency code of the PV document number associated with this manual check request line.
20	REFERENCED DOCUMENT(S) NUMBER	REQUIRED. Field length 11. Data type: alphanumeric. Enter the document number of the PV associated with this manual check request line.
21	REFERENCED DOCUMENT(S) LN	REQUIRED. Field length 2. Data type: numeric. Enter the line number of the PV line associated with this manual check request line.
22	REFERENCED DOCUMENT(S) INVOICE	REQUIRED. Field length 12. Data type: alphanumeric. Enter the invoice number of the PV line associated with this manual check request line.
23	FUND	LEAVE BLANK.
24	AGENCY	LEAVE BLANK.
25	ORG	LEAVE BLANK.
26	SUB ORG	LEAVE BLANK.
27	APPR UNIT	LEAVE BLANK.
28	ACTIVITY	LEAVE BLANK.
29	OBJ	LEAVE BLANK.
30	SUB OBJ	LEAVE BLANK.

FIELD	FIELD NAME	FIELD DESCRIPTION
31	REV SRC	LEAVE BLANK.
32	SUB REV	LEAVE BLANK.
33	JOB NO.	LEAVE BLANK.
34	REPT CATG	LEAVE BLANK.
35	BS ACCT	LEAVE BLANK.
36	ACT DEL DT	LEAVE BLANK.
37	DESCRIPTION	OPTIONAL. Field length 18. Data type: alphanumeric. Enter a brief description about the manual check request line as needed.
38	QUANTITY	LEAVE BLANK.
39	AMOUNT	REQUIRED. Field length 14. Data type: numeric. Enter the amount of this line. This amount must include cents.
40	I/D	LEAVE BLANK.
41	P/F	LEAVE BLANK.
42	PREPARED BY DATE PHONE	REQUIRED. Enter the signature of the person who prepared this manual check request, the date, and their phone number.
43	APPROVED BY DATE PHONE	REQUIRED. Enter the signature of the person authorized to sign financial documents for the agency initiating this manual check request, the date, and their phone number.
44	OSRAP APPROVAL DATE PHONE	LEAVE BLANK.
45	STATE TREASURY APPROVAL DATE PHONE	LEAVE BLANK.

MANUAL CHECK REQUEST (MW)
(EXAMPLE B)

Instructions for completing a request for a manual check for an expense/expenditure when a GFS payment document (PV, P1, QV) was not previously processed. When filling out this form, use the number of accounting lines required to complete the payment.

FIELD	FIELD NAME	FIELD DESCRIPTION
1	PAGE	REQUIRED. Enter the page number for this manual check request as needed.
2	CHECK OR NO CHECK OR WIRE TRANSFER	REQUIRED. Circle the "Check" field to indicate that this manual check request will result in a manual check.
3	STATE TREASURY USE ONLY	LEAVE BLANK.
4	REQUESTING AGENCY NAME	REQUIRED. Enter the name of the agency initiating this manual check request.
5	AGENCY NUMBER	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency number of the agency initiating this manual check request.
6	MW DATE	LEAVE BLANK.
7	ACCTG PRD	REQUIRED. Field length 4. Data type: numeric. Enter the accounting period to be used for this manual check request.
8	BUDGET FY	REQUIRED for capital outlay appropriations. LEAVE BLANK for regular appropriations. Field length 2. Data type: numeric. Enter the budget fiscal year to be used for this manual check request.
9	ACTION	LEAVE BLANK.
10	RECEIVING FUND	LEAVE BLANK.
11	BANK ACCT CODE	REQUIRED. Field length 2. Data type: alphanumeric. Enter the bank account code of the account from which the check will be issued for this manual check request.
12	CASH ACCT	LEAVE BLANK.
13	VENDOR CODE	REQUIRED. Field length 11. Data type: alphanumeric. Enter the vendor code to be used for this manual check request.

FIELD	FIELD NAME	FIELD DESCRIPTION
14	VENDOR NAME	REQUIRED. Field length 30. Data type: alphanumeric. Enter the vendor name to be used for this manual check request.
15	VENDOR ADDRESS	REQUIRED. Enter the vendor address to be used for this manual check request.
16	COMMENTS	OPTIONAL. Field length 12. Data type: alphanumeric. Enter a brief description about this manual check request as needed.
17	DOCUMENT TOTAL	REQUIRED. Field length 14. Data type: numeric. Enter the total of all lines on this manual check request. This amount must include cents.
18	REFERENCED DOCUMENTS(S) CD	LEAVE BLANK.
19	REFERENCED DOCUMENTS(S) AGY	LEAVE BLANK.
20	REFERENCED DOCUMENT(S) NUMBER	LEAVE BLANK.
21	REFERENCED DOCUMENT(S) LN	LEAVE BLANK.
22	REFERENCED DOCUMENT(S) INVOICE	LEAVE BLANK.
23	FUND	REQUIRED for manual check request lines without an expenditure organization (i.e., capital outlay appropriations or balance sheet accounts). LEAVE BLANK for manual check request lines with an expenditure organization (i.e., regular appropriations). Field length 3. Data type: alphanumeric. Enter the fund code for this manual check request line.
24	AGENCY	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency code for this manual check request line.

FIELD	FIELD NAME	FIELD DESCRIPTION
25	ORG	REQUIRED for manual check request lines associated with regular appropriations. LEAVE BLANK for manual check request lines associated with capital outlay appropriations or balance sheet accounts. Field length 4. Data type: alphanumeric. Enter the expenditure organization code for this manual check request line.
26	SUB ORG	LEAVE BLANK.
27	APPR UNIT	REQUIRED for manual check request lines without an expenditure organization (i.e., capital outlay appropriations). LEAVE BLANK for manual check request lines with an expenditure organization (i.e., regular appropriations), and balance sheet accounts. Field length 3. Data type: alphanumeric. Enter the appropriation unit code for this manual check request line.
28	ACTIVITY	LEAVE BLANK.
29	OBJ	REQUIRED for manual check request lines for an expense/expenditure. LEAVE BLANK for revenue or balance sheet account activity. Field length 4. Data type: alphanumeric. Enter the expenditure object account code for this manual check request line.
30	SUB OBJ	OPTIONAL. Field length 2. Data type: alphanumeric. Enter a sub-object for this manual check request line as needed.
31	REV SRC	LEAVE BLANK.
32	SUB REV	LEAVE BLANK.
33	JOB NO.	REQUIRED for manual check request lines associated with capital outlay. LEAVE BLANK for non-capital outlay appropriations. Field length 8. Data type: alphanumeric. Enter the project number for this manual check request line.
34	REPT CATG	OPTIONAL. Field length 4. Data type: alphanumeric. Inferred from organization code if available. Enter the reporting category associated with this manual check request line as needed.
35	BS ACCT	LEAVE BLANK.

FIELD	FIELD NAME	FIELD DESCRIPTION
36	ACT DEL DT	REQUIRED. Field length 6. Data type: numeric. Enter the actual delivery date for this manual check request line.
37	DESCRIPTION	OPTIONAL. Field length 18. Data type: alphanumeric. Enter a brief description about the manual check request line as needed.
38	QUANTITY	LEAVE BLANK.
39	AMOUNT	REQUIRED. Field length 14. Data type: numeric. Enter the amount of this line. This amount must include cents.
40	I/D	LEAVE BLANK.
41	P/F	LEAVE BLANK.
42	PREPARED BY DATE PHONE	REQUIRED. Enter the signature of the person who prepared this manual check request, the date, and their phone number.
43	APPROVED BY DATE PHONE	REQUIRED. Enter the signature of the person authorized to sign financial documents for the agency initiating this manual check request, the date, and their phone number.
44	OSRAP APPROVAL DATE PHONE	LEAVE BLANK.
45	STATE TREASURY APPROVAL DATE PHONE	LEAVE BLANK.

MANUAL CHECK REQUEST (MW)
(EXAMPLE C)

Instructions for completing a request for a manual check for a refund of revenue when a GFS payment document (PV, P1, QV) was <u>not</u> previously processed. When filling out this form, use the number of accounting lines required to complete the payment.

FIELD	FIELD NAME	FIELD DESCRIPTION
1	PAGE	REQUIRED. Enter the page number for this manual check request as needed.
2	CHECK OR NO CHECK OR WIRE TRANSFER	REQUIRED. Circle the "Check" field to indicate that this manual check request will result in a manual check.
3	STATE TREASURY USE ONLY	LEAVE BLANK.
4	REQUESTING AGENCY NAME	REQUIRED. Enter the name of the agency initiating this manual check request.
5	AGENCY NUMBER	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency number of the agency initiating this manual check request.
6	MW DATE	LEAVE BLANK.
7	ACCTG PRD	REQUIRED. Field length 4. Data type: numeric. Enter the accounting period to be used for this manual check request.
8	BUDGET FY	REQUIRED for capital outlay appropriations. LEAVE BLANK for regular appropriations. Field length 2. Data type: numeric. Enter the budget fiscal year to be used for this manual check request.
9	ACTION	LEAVE BLANK.
10	RECEIVING FUND	LEAVE BLANK.
11	BANK ACCT CODE	REQUIRED. Field length 2. Data type: alphanumeric. Enter the bank account code of the account from which the check will be issued for this manual check request.
12	CASH ACCT	LEAVE BLANK.
13	VENDOR CODE	REQUIRED. Field length 11. Data type: alphanumeric. Enter the vendor code to be used for this manual check request.

FIELD	FIELD NAME	FIELD DESCRIPTION
14	VENDOR NAME	REQUIRED. Field length 30. Data type: alphanumeric. Enter the vendor name to be used for this manual check request.
15	VENDOR ADDRESS	REQUIRED. Enter the vendor address to be used for this manual check request.
16	COMMENTS	OPTIONAL. Field length 12. Data type: alphanumeric. Enter a brief description about this manual check request as needed.
17	DOCUMENT TOTAL	REQUIRED. Field length 14. Data type: numeric. Enter the total of all lines on this manual check request. This amount must include cents.
18	REFERENCED DOCUMENTS(S) CD	LEAVE BLANK.
19	REFERENCED DOCUMENTS(S) AGY	LEAVE BLANK.
20	REFERENCED DOCUMENT(S) NUMBER	LEAVE BLANK.
21	REFERENCED DOCUMENT(S) LN	LEAVE BLANK.
22	REFERENCED DOCUMENT(S) INVOICE	LEAVE BLANK.
23	FUND	REQUIRED for manual check request lines without a revenue organization (i.e., capital outlay appropriations or balance sheet accounts). LEAVE BLANK for manual check request lines with a revenue organization (i.e., regular appropriations). Field length 3. Data type: alphanumeric. Enter the fund code for this manual check request line.
24	AGENCY	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency code for this manual check request line.

FIELD	FIELD NAME	FIELD DESCRIPTION
25	ORG	REQUIRED for manual check request lines associated with regular appropriations. LEAVE BLANK for manual check request lines associated with capital outlay appropriations or balance sheet accounts. Field length 4. Data type: alphanumeric. Enter the revenue organization code for this manual check request line.
26	SUB ORG	LEAVE BLANK.
27	APPR UNIT	REQUIRED for manual check request lines without a revenue organization (i.e., capital outlay appropriations). LEAVE BLANK for manual check request lines with a revenue organization (i.e., regular appropriations), and balance sheet accounts. Field length 3. Data type: alphanumeric. Enter the appropriation unit code for this manual check request line.
28	ACTIVITY	LEAVE BLANK.
29	OBJ	LEAVE BLANK.
30	SUB OBJ	LEAVE BLANK.
31	REV SRC	REQUIRED for manual check request lines for a revenue refund. LEAVE BLANK for expense/expenditure or balance sheet account activity. Field length 4. Data type: alphanumeric. Enter the revenue source account code for this manual check request line.
32	SUB REV	OPTIONAL. Field length 2. Data type: alphanumeric. Enter a sub-revenue for this manual check request line as needed.
33	JOB NO.	REQUIRED for manual check request lines associated with capital outlay. LEAVE BLANK for non-capital outlay appropriations. Field length 8. Data type: alphanumeric. Enter the project number for this manual check request line.
34	REPT CATG	OPTIONAL. Field length 4. Data type: alphanumeric. Inferred from organization code if available. Enter the reporting category associated with this manual check request line as needed.
35	BS ACCT	LEAVE BLANK.

FIELD	FIELD NAME	FIELD DESCRIPTION
36	ACT DEL DT	REQUIRED. Field length 6. Data type: numeric. Enter the manual check request date for this manual check request line.
37	DESCRIPTION	OPTIONAL. Field length 18. Data type: alphanumeric. Enter a brief description about the manual check request line as needed.
38	QUANTITY	LEAVE BLANK.
39	AMOUNT	REQUIRED. Field length 14. Data type: numeric. Enter the amount of this line. This amount must include cents.
40	I/D	LEAVE BLANK.
41	P/F	LEAVE BLANK.
42	PREPARED BY DATE PHONE	REQUIRED. Enter the signature of the person who prepared this manual check request, the date, and their phone number.
43	APPROVED BY DATE PHONE	REQUIRED. Enter the signature of the person authorized to sign financial documents for the agency initiating this manual check request, the date, and their phone number.
44	OSRAP APPROVAL DATE PHONE	LEAVE BLANK.
45	STATE TREASURY APPROVAL DATE PHONE	LEAVE BLANK.

MANUAL CHECK REQUEST (MW)
(EXAMPLE D)

Instructions for completing a request for a manual check for a balance sheet account when a GFS payment document (PV, P1, QV) was <u>not</u> previously processed. When filling out this form, use the number of accounting lines required to complete the payment.

FIELD	FIELD NAME	FIELD DESCRIPTION
1	PAGE	REQUIRED. Enter the page number for this manual check request as needed.
2	CHECK OR NO CHECK OR WIRE TRANSFER	REQUIRED. Circle the "Check" field to indicate that this manual check request will result in a manual check.
3	STATE TREASURY USE ONLY	LEAVE BLANK.
4	REQUESTING AGENCY NAME	REQUIRED. Enter the name of the agency initiating this manual check request.
5	AGENCY NUMBER	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency number of the agency initiating this manual check request.
6	MW DATE	LEAVE BLANK.
7	ACCTG PRD	REQUIRED. Field length 4. Data type: numeric. Enter the accounting period to be used for this manual check request.
8	BUDGET FY	REQUIRED for capital outlay appropriations. LEAVE BLANK for regular appropriations. Field length 2. Data type: numeric. Enter the budget fiscal year to be used for this manual check request.
9	ACTION	LEAVE BLANK.
10	RECEIVING FUND	LEAVE BLANK.
11	BANK ACCT CODE	REQUIRED. Field length 2. Data type: alphanumeric. Enter the bank account code of the account from which the check will be issued for this manual check request.
12	CASH ACCT	LEAVE BLANK.
13	VENDOR CODE	REQUIRED. Field length 11. Data type: alphanumeric. Enter the vendor code to be used for this manual check request.

FIELD	FIELD NAME	FIELD DESCRIPTION
14	VENDOR NAME	REQUIRED. Field length 30. Data type: alphanumeric. Enter the vendor name to be used for this manual check request.
15	VENDOR ADDRESS	REQUIRED. Enter the vendor address to be used for this manual check request.
16	COMMENTS	OPTIONAL. Field length 12. Data type: alphanumeric. Enter a brief description about this manual check request as needed.
17	DOCUMENT TOTAL	REQUIRED. Field length 14. Data type: numeric. Enter the total of all lines on this manual check request. This amount must include cents.
18	REFERENCED DOCUMENTS(S) CD	LEAVE BLANK.
19	REFERENCED DOCUMENTS(S) AGY	LEAVE BLANK.
20	REFERENCED DOCUMENT(S) NUMBER	LEAVE BLANK.
21	REFERENCED DOCUMENT(S) LN	LEAVE BLANK.
22	REFERENCED DOCUMENT(S) INVOICE	LEAVE BLANK.
23	FUND	REQUIRED. Field length 3. Data type: alphanumeric. Enter the fund code for this manual check request line.
24	AGENCY	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency code for this manual check request line.
25	ORG	LEAVE BLANK.
26	SUB ORG	LEAVE BLANK.
27	APPR UNIT	LEAVE BLANK.
28	ACTIVITY	LEAVE BLANK.

FIELD	FIELD NAME	FIELD DESCRIPTION
29	OBJ	LEAVE BLANK.
30	SUB OBJ	LEAVE BLANK.
31	REV SRC	LEAVE BLANK.
32	SUB REV	LEAVE BLANK.
33	JOB NO.	LEAVE BLANK.
34	REPT CATG	LEAVE BLANK.
35	BS ACCT	REQUIRED for manual check request lines for balance sheet accounts. LEAVE BLANK for expense/expenditure or revenue activity. Field length 4. Data type: alphanumeric. Enter the balance sheet account code for this manual check request line.
36	ACT DEL DT	REQUIRED. Field length 6. Data type: numeric. Enter the actual delivery date for this manual check request line.
37	DESCRIPTION	OPTIONAL. Field length 18. Data type: alphanumeric. Enter a brief description about the manual check request line as needed.
38	QUANTITY	LEAVE BLANK.
39	AMOUNT	REQUIRED. Field length 14. Data type: numeric. Enter the amount of this line. This amount must include cents.
40	I/D	LEAVE BLANK.
41	P/F	LEAVE BLANK.
42	PREPARED BY DATE PHONE	REQUIRED. Enter the signature of the person who prepared this manual check request, the date, and their phone number.
43	APPROVED BY DATE PHONE	REQUIRED. Enter the signature of the person authorized to sign financial documents for the agency initiating this manual check request, the date, and their phone number.
44	OSRAP APPROVAL DATE PHONE	LEAVE BLANK.

FIELD	FIELD NAME	FIELD DESCRIPTION
45	STATE TREASURY APPROVAL DATE PHONE	LEAVE BLANK.

MANUAL CHECK REQUEST (MW)
(EXAMPLE E)

Instructions for completing a request for a manual check request when a deposit and subsequent classification was made to GFS during the 45 day conversion period that should have been recorded in FACS. When filling out this form, use the exact accounting distribution of the portion of the original classification that should have been recorded in FACS. The coding for an original classification to revenue and return of appropriation are included. Choose the correct fields as needed. Refer to Memorandum 96-57 for the procedure requiring this form.

FIELD	FIELD NAME	FIELD DESCRIPTION
1	PAGE	REQUIRED. Enter the page number for this manual check request as needed.
2	CHECK OR NO CHECK OR WIRE TRANSFER	REQUIRED. Circle the "Check" field to indicate that this manual check request will result in a manual check.
3	STATE TREASURY USE ONLY	LEAVE BLANK.
4	REQUESTING AGENCY NAME	REQUIRED. Enter the name of the agency initiating this manual check request.
5	AGENCY NUMBER	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency number of the agency initiating this manual check request.
6	MW DATE	LEAVE BLANK.
7	ACCTG PRD	REQUIRED. Field length 4. Data type: numeric. Enter the accounting period to be used for this manual check request.
8	BUDGET FY	REQUIRED for capital outlay appropriations. LEAVE BLANK for regular appropriations. Field length 2. Data type: numeric. Enter the budget fiscal year to be used for this manual check request.
9	ACTION	LEAVE BLANK.
10	RECEIVING FUND	LEAVE BLANK.

FIELD	FIELD NAME	FIELD DESCRIPTION
11	BANK ACCT CODE	REQUIRED. Field length 2. Data type: alphanumeric. Enter the bank account code of the account from which the check will be issued for this manual check request.
12	CASH ACCT	LEAVE BLANK.
13	VENDOR CODE	REQUIRED. Field length 11. Data type: alphanumeric. Enter the vendor code "72600083801" for this manual check request.
14	VENDOR NAME	REQUIRED. Field length 30. Data type: alphanumeric. Enter the vendor name "State Treasurer of LA" for this manual check request.
15	VENDOR ADDRESS	REQUIRED. Enter the vendor address "P.O. Box 44154, 3rd Floor State Capitol, Baton Rouge, LA 70804" for this manual check request.
16	COMMENTS	OPTIONAL. Field length 12. Data type: alphanumeric. Enter a brief description about this manual check request as needed.
17	DOCUMENT TOTAL	REQUIRED. Field length 14. Data type: numeric. Enter the total of all lines on this manual check request. This amount must include cents.
18	REFERENCED DOCUMENTS(S) CD	LEAVE BLANK.
19	REFERENCED DOCUMENTS(S) AGY	LEAVE BLANK.
20	REFERENCED DOCUMENT(S) NUMBER	LEAVE BLANK.
21	REFERENCED DOCUMENT(S) LN	LEAVE BLANK.
22	REFERENCED DOCUMENT(S) INVOICE	LEAVE BLANK.

FIELD	FIELD NAME	FIELD DESCRIPTION
23	FUND	REQUIRED for manual check request lines without a revenue or expenditure organization (i.e., capital outlay appropriations). LEAVE BLANK for manual check request lines with a revenue or expenditure organization (i.e., regular appropriations). Field length 3. Data type: alphanumeric. Enter the fund code, to which the classification was originally coded, on this manual check request line.
24	AGENCY	REQUIRED. Field length 3. Data type: alphanumeric. Enter the agency code, to which the classification was originally coded, on this manual check request line.
25	ORG	REQUIRED for manual check request lines associated with regular appropriations. LEAVE BLANK for manual check request lines associated with capital outlay appropriations. Field length 4. Data type: alphanumeric. Enter the revenue or expenditure organization code, to which the classification was originally coded, on this manual check request line.
26	SUB ORG	LEAVE BLANK.
27	APPR UNIT	REQUIRED for manual check request lines without a revenue or expenditure organization (i.e., capital outlay appropriations). LEAVE BLANK for manual check request lines with a revenue or expenditure organization (i.e., regular appropriations). Field length 3. Data type: alphanumeric. Enter the appropriation unit code, to which the classification was originally coded, on this manual check request line.
28	ACTIVITY	LEAVE BLANK.
29	OBJ	REQUIRED for manual check request lines if the original classification was coded for a return of appropriation (expense/expenditure). LEAVE BLANK if not originally coded. Field length 4. Data type: alphanumeric. Enter the object code, to which the classification was originally coded, on this manual check request line.
30	SUB OBJ	OPTIONAL. Field length 2. Data type: alphanumeric. If originally coded, enter a sub-object for this manual check request line.

FIELD	FIELD NAME	FIELD DESCRIPTION
31	REV SRC	REQUIRED for manual check request lines if the original classification was coded for a revenue. LEAVE BLANK if not originally coded. Field length 4. Data type: alphanumeric. Enter the revenue source code, to which the classification was originally coded, on this manual check request line.
32	SUB REV	OPTIONAL. Field length 2. Data type: alphanumeric. If originally coded, enter a sub-revenue source for this manual check request line.
33	JOB NO.	REQUIRED for manual check request lines originally coded for capital outlay. LEAVE BLANK for lines originally coded for non-capital outlay appropriations. Field length 8. Data type: alphanumeric. Enter the project number, to which the classification was originally coded, on this manual check request line.
34	REPT CATG	OPTIONAL. Field length 4. Data type: alphanumeric. Inferred from organization code if available. Enter the reporting category, to which the classification was originally coded, on this manual check request line.
35	BS ACCT	LEAVE BLANK.
36	ACT DEL DT	REQUIRED. Field length 6. Data type: numeric. Enter the date of the original classification (if available) for this manual check request line. Otherwise enter the manual check request date.
37	DESCRIPTION	OPTIONAL. Field length 18. Data type: alphanumeric. Enter a brief description about the manual check request line as needed.
38	QUANTITY	LEAVE BLANK.
39	AMOUNT	REQUIRED. Field length 14. Data type: numeric. Enter the amount of this line that will be classified in FACS. This amount must include cents.
40	I/D	LEAVE BLANK.
41	P/F	LEAVE BLANK.
42	PREPARED BY DATE PHONE	REQUIRED. Enter the signature of the person who prepared this manual check request, the date, and their phone number.

FIELD	FIELD NAME	FIELD DESCRIPTION
43	APPROVED BY DATE PHONE	REQUIRED. Enter the signature of the person authorized to sign financial documents for the agency initiating this manual check request, the date, and their phone number.
44	OSRAP APPROVAL DATE PHONE	LEAVE BLANK.
45	STATE TREASURY APPROVAL DATE PHONE	LEAVE BLANK.