



MESSAGE FROM THE DIRECTOR:

YOU ARE ELIGIBLE TO RECEIVE PAYMENTS FROM THE STATE OF LOUISIANA VIA EFT!!!

The State prints and mails ISIS checks on Tuesdays and Fridays of each week, except for holidays. EFTs are sent to the State's Bank each weekday. Therefore, electing to receive payment through EFT can result in you receiving your payments sooner. Also, since the payment is deposited directly into your bank account, the costs associated with making and receiving a payment are lower. It is a win/win situation for all involved.

You may elect to receive all payments due you by check or by EFT. If you elect to receive your payments via EFT, the enclosed form must be completed and signed by you or an authorized individual within your organization and your financial institution.

At the time of enrollment, all participants must have an active checking or savings account at a financial institution that can accept ACH credit files and remittance information electronically. The State will not establish duplicate vendor records to accommodate multiple bank accounts or enroll one-time payment payees. Enrollees must agree to all of the conditions on the enrollment form.

Upon receipt of the completed form, entry and activation of your EFT record will take between 5-10 days. After your enrollment has been activated, payments to you will be sent electronically in the normal course of business.

If changes occur that effect your bank or account information, contact our office immediately through the telephone number or address listed below. Failure to do so will result in lost payments. The State will bear no responsibility for lost or misdirected

payments if it is determined that you failed to provide correct information or notify us of changes effecting your bank and/or account information.

Payees that elect to receive payments via EFT will not be sent paper remittance advices. Instead, it will be transmitted electronically to the financial institution receiving these funds on your behalf. The remittance information sent electronically will mirror the information currently printed on check stubs. **Your financial institution must have the ability to receive ACH credit transactions (CTX entries) and the 820 transaction set.**

As a convenience the State of Louisiana provides you with remittance information through the Internet. The next section contains more information on this new feature.

However, that does not relieve you of the responsibility for arranging to receive this information from you bank before enrolling in EFT. If you desire the receipt of remittance information as EFTs are received, you must specifically request your financial institution provide it to you. By signing the attached form, you signify that you have been in contact with your bank regarding this matter. You will be responsible for any fees assessed by your financial institution for this service.

Please note that **all payments** issued by the State of Louisiana to the location specified will issue through EFT regardless of the agency requesting payment. Therefore, it is critical that you receive your remittance advices from your financial institution in a user-friendly format. If upon receipt of the remittance information, you have questions regarding a payment, you should contact the agency whose telephone number is provided.

Further, in case of an overpayment you must agree to allow the State to withdraw funds

electronically from your account. The agency that issued the overpayment must have either documentation from you (i.e., a credit memo) or notified you that an overpayment occurred before the funds can be withdrawn.

Completed forms and a copy of a voided check should be mailed or faxed directly to the address below. For confidentiality reasons, do not return this form to any agency other than the Office of Statewide Reporting and Accounting Policy (OSRAP).

**REMITTANCE INFORMATION
AVAILABLE ON-LINE 24 HOURS A
DAY 7 DAYS A WEEK!!!!!!**

The Division of Administration has developed a Web based application that presents detailed payment information about payments made from the State's central accounting system (ISIS). The website is secured and available to all persons and/or entities that receive payments from the State of Louisiana's central accounting system. It will be accessible through OSRAP's Homepage at <http://www.state.la.us/OSRAP/INDEX.HTM> by clicking on the Vendor Search button.

Payees will have the ability to search for and view payment information for the most recent 18 months initially, but the period will eventually be extended to three years. **This site is useful for payments received by check as well as payments received by electronic funds transfer (EFT).**

Access to the application is via a LOG IN screen where the user must provide either a valid taxpayer identification number (TIN - FEIN or SSN). The site is organized with you in mind and navigation is logical and simple. Help text is available at all points throughout the site. Popup help text is also available on selected fields. Availability of popup help text is signified by a question mark when you mouse over an item.

The information available on the site is everything normally printed on a check stub or in an 820 transaction set transmitted with an EFT record. A distinct advantage to using this application is that you can choose to see single, multiple or all locations associated with your particular TIN. Agency Accounts Payable Office contact information is available by clicking on the three-digit agency number located on the Payee Detail screen

Other advantages of using the Vendor Search Application are reduced phone charges. Information can be obtained via the Internet instead of incurring long distance charges. Information is available during non business hours. This could be especially useful to payees who are located in a different time zone. Also, vendors who are receiving EFT payments will no longer have to rely on banking institutions to provide remittance information or incur the costs these institutions may assess for providing such information.

With the addition of this application and the reduction in check printing, we strongly encourage you to sign up to receive payments by EFT. For your convenience an enrollment form, instructions and letter is enclosed. If you would be interested in EFT payment or have additional questions, please direct those inquiries to OSRAP:

Office of Statewide Reporting and
Accounting Policy
OSRAP Help Desk (225) 342-1097
FAX (225) 342-1053

I hope you will take advantage of this new payment method.

Sincerely,

F. Howard Karlton, CPA, CGFM
Director

COMPLETING THE ENROLLMENT FORM:

You are to complete the unshaded portions of the enrollment form. Please complete the fields of the form with the following information:

Vendor Name - The name of your company or organization as it appears on the bank account referenced.

Vendor Address - The mailing address of your organization to which all payments are sent.

Vendor FEIN/SSN - The Federal Tax Identification Number or Social Security Number of your organization.

ABA NO/CHCK Digit - The 9 digit routing code of the financial institution for the specified savings or checking account to which funds will be deposited. If funds are deposited into your checking account, the routing number usually precedes your checking account number on the bottom of your checks.

Check/Savings Ind - Circle the appropriate letter. "C" denotes the account information provided is for a checking account and "S" denotes a savings account.

Bank Account Number - The bank account to which funds are to be deposited.

Bank ACCT DESCR - A general description of the bank account. For example, "Company XYX corporate checking account."

Bank Name - The name of the financial institution to which funds will be deposited.

Bank Address - (lines 1 -3) The mailing address of the financial institution to which funds will be deposited.

City/State/Zip - The City/State/Zip for the mailing address listed.

Bank Telephone Number - The telephone number of the branch or bank office to contact for assistance with transmission problem resolution.

Preparer's Signature - The signature of the individual completing this form.

Print Name - print or type the name of the individual completing this form.

Title - The title of the individual completing this form.

Date - The date that the form is completed.

Phone Number - The telephone number of the individual completing the form.

NOTE: Please include a copy of a voided check as verification of account information. A representative from your financial institution must complete and sign the shaded area at the end of the form. You have received this newsletter solely because you are on the State's vendor file. Receipt of this newsletter does not signify that an obligation to you did or does exist.