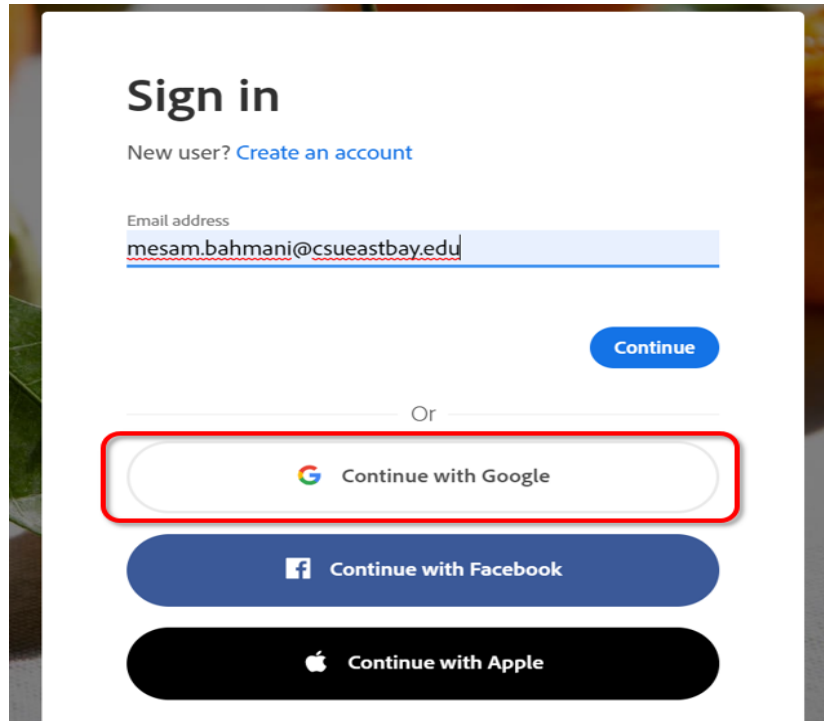
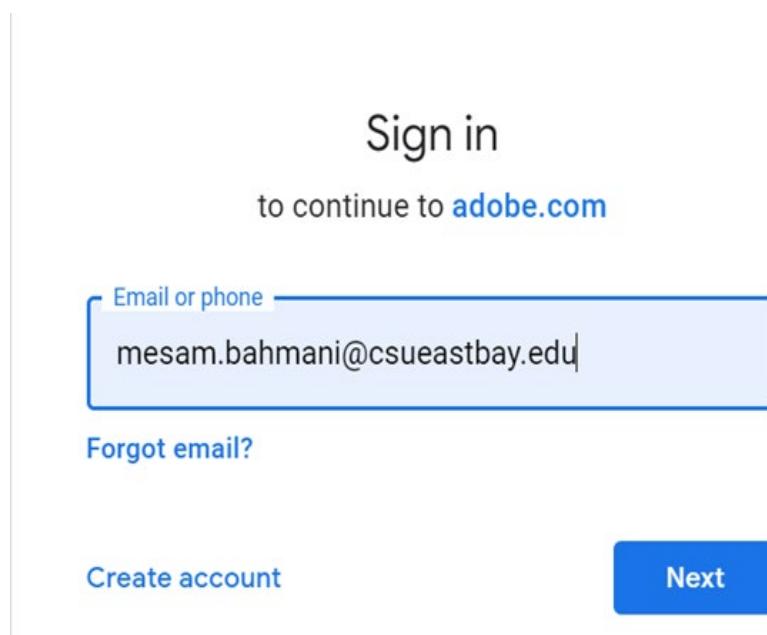


# Adobe Sign Workflow - Check Request


1. Login to Adobe Sign: <https://sign.csueastbay.edu>. Continue with Google.



2. Enter your university email address.



3. Authenticate with your NetID and password.



Sign in with your NetID and Password


NetID

Password

Keep me signed in

Sign in

4. Go to the [Use a Workflow](#) section and scroll down to access the form labeled “AP- Check Request”. Then, click [Start](#).



POWERED BY Adobe Sign

Home Send Manage Reports Account

Hello, Veronica What would you like to do?

Get a Signature

Get a Document Signed  
Get a signature in seconds

Send from Library

Select a document Start

Use a Workflow

Select a workflow Start

Use a Workflow

Select a workflow Start

Account: CSUEastBay

AA - PAF Sign In Sheet

AP - Check Request Form

AP - Invoice Approval Form

eBenefits Self-Service Authorization Form

FS - Travel Authorization Form (PREPARER)

5. Routing the form: (Either Managers or Employees can initiate)
  - a. In the Prepared By field, enter the email address of the employee who is completing the form.
  - b. In the DOA Approval field, enter the email address of the employee's manager who will approve.
  - c. In the AP Technician field, enter the email of the technician based on vendors, and individuals Last Name: Tammy Heard (A-H), Christina Crosby (I-P), and Angie Trujillo (Q,Z)
  - d. In the Additional Document field, attach your supporting document
  - e. Click "Send". The form will open for you to complete before sending to approver.

## AP - Check Request Form

How this workflow works?

Complete all appropriate fields on the form. Do not use the form except for the processing of authorized items.

\*This form is not to be used for employee reimbursement

### Recipients



Prepared By \*

Myself	Email	
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Delegation of Authority 1 \*

Enter recipient email	Email	
-----------------------	-------	--

Delegation of Authority 2

Enter recipient email	Email	
-----------------------	-------	--

Delegation of Authority 3

Enter recipient email	Email	
-----------------------	-------	--

Delegation of Authority 4

Enter recipient email	Email	
-----------------------	-------	--

Delegation of Authority 5

Enter recipient email	Email	
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AP Technician - based on vendors, and individuals last Name: Tammy Heard (A-H), Christina Crosby (I-P), and Angie Trujillo (Q-Z) \*

Enter recipient email	Email	
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### Files

AP- Check Request *	AP- Check Request Form
Additional Documentation 1	<a href="#">Add File</a>
Additional Documentation 2	<a href="#">Add File</a>
Additional Documentation 3	<a href="#">Add File</a>
Additional Documentation 4	<a href="#">Add File</a>
Additional Documentation 5	<a href="#">Add File</a>
Additional Documentation 6	<a href="#">Add File</a>
Additional Documentation 7	<a href="#">Add File</a>
Additional Documentation 8	<a href="#">Add File</a>
Additional Documentation 9	<a href="#">Add File</a>
Additional Documentation 10	<a href="#">Add File</a>

<a href="#">Send</a>
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6. All parties in the agreement will receive a final signed copy once it is approved.