<u>Basic Instructions to complete and sign fillable PDF forms</u>
(For detailed instructions with screen shots, please see the link on the Business Services Resources website)

- Download the form to your computer
- Open the form in Adobe – make sure that it does not open in a web browser such as Edge or Google
  - If your form opens in the web browser do not begin to fill in the form. Close the web browser and go to your downloads folder to find the document.
  - Right click on the document and choose Open With, then open with Adobe Reader DC or Adobe Acrobat
  - If you do not have those choices, go to the Software Center on your computer and download Adobe Reader DC. *For assistance, please talk to IT. They should be able to help you download and set it as your default for pdf files.*
- Once it is opened in Adobe you should be able to fill in the information and digitally sign.
- To sign click in the signature box and follow the prompts for your digital signature.
  - If you have not set up a Window Digital Signature, please do so at this time.
  - Make sure that you choose a Windows Digital ID, the other one will require a password and the Windows ID is available across all platforms.
- <u>Before your signature is visible Adobe will ask you to save the form</u>. Please save it with your initials so that you know it is the signed version.
- Once you have signed it you can email it to the next person who needs to sign it. If you are not sure who that is, send it to the Administrative Assistant in your Department.
  - For the digital signatures to work we need you to email the forms.
  - Please do not print and scan or hand carry them to the next person.

Please do not hesitate to reach out to me if you have any issues.

Thank you for your patience as we continue to work through this new way of doing things.

Sincerely,

Gayle Jones
Business Services
Data & Reporting Specialist
865-425-9046
jgjones@ortn.edu

FY____

Oak Ridge Schools
Check Request Form

MAKE CHECKS PAYABLE TO:

NAME

ADDRESS

CITY   STATE   ZIP CODE

VENDOR CONTACT NAME & PHONE #:   VENDOR CODE:
(IF REIMBURSEMENT COMPANY NAME)

PAYMENT REQUESTED: ___ REIMBURSEMENT   ____ DIRECT PAY

INVOICE #	DESCRIPTION	ACCOUNT #	AMOUNT
		TOTAL	

Reason for purchase:

REQUESTED BY:_____

****THIS FORM IS NOT TO BE USED IN LIEU OF THE PURCHASE ORDER PROCESS****

USE FOR PREPAYMENT OF NEXT FISCAL YEAR INVOICES OR WHEN ONLINE CHECK REQUEST SYSTEM UNAVAILABLE

Bldg/Dept. Approval _____   Final Approval _____

Audit By _____   Business Dept. _____