

AdvantageME Security Application

Type of Request

Please send completed form to Kim Hall at the Office of the State Controller, 14 SHS.

Directory Information:

Last Name

First Name

Old Name (if changed)

Phone #

Email Address

Locality/Divison

Organization Access:

Home Department:

Financial Security & Workflow Access:

For data enter & approval rights, check all applicable boxes.

Foreign Dept Data Enter

Foreign Dept Approval

Functional Area	Data Enter	Approve	Mgr Approve	View
Accounts Payable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accounts Receivable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost Accounting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cash Receipt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fixed Asset	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JV's & Internal Payments (IET)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Batch Interface (BIE User)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vendor/Customer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Procurement Security Access:

(for data enter & approval rights, check all applicable boxes)

Foreign Dept Data Enter

Foreign Dept Approval

See page 2 for Procurement Workflow access.

Procurement User	
Data Enter	<input type="checkbox"/>
CT Data Enter	<input type="checkbox"/>
Approver	<input type="checkbox"/>
Mgr Approver	<input type="checkbox"/>
Dept Designee	<input type="checkbox"/>

Reporting Access:

InfoAdvantage Access (Warehouse)

Fortis Reporting (View & Print System Reports)

Other Security Access:

Select specific access required.

Help Desk Users (Password Reset)	<input type="checkbox"/>	Procurement Special Approval (Budget, Gov, OIT, OSC)	<input type="checkbox"/>
OSC - Financial Rpt or Internal Ctrl	<input type="checkbox"/>	Treasury (Admin/Approver/User)	<input type="checkbox"/>
OSC - General Accounting	<input type="checkbox"/>	Surplus	<input type="checkbox"/>
Prepare Receiving Documents	<input type="checkbox"/>	Warehouse	<input type="checkbox"/>
Dept of Audit or Bureau of Budget	<input type="checkbox"/>	Procurement (Buyer/Admin/Audit)	<input type="checkbox"/>

Incumbent Replacement:

Is the above user replacing an incumbent?

This person will be removed from access to systems.

If "Yes" provide name:

**Procurement Workflow
Access:**

Dept: (Home & Foreign)	Workflow Units (ex: WFXX, SCXX) List all applicable units for each department.
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Procurement Shipping Location:

Address:

Procurement Billing Location:

Address:

I understand that the User ID and password that will be assigned to me is not to be reassigned, transferred or loaned to another individual. I understand that, should I knowingly provide my ID to another individual, my security may be revoked.

User Signature: _____ DATE:

I have reviewed this application for security access, and certify that the above named user is authorized to receive the requested access for the completion of the responsibilities of his or her position.

Supervisor Signature Date: _____ Agency Security Coordinator Signature Date: _____

Office of the State Controller Signature Date: _____ Division of Purchases Signature Date: _____

Administrative Use Only:

OSC: _____ DOP: _____ Treasury: _____

Workspaces: _____ InfoAdv: _____ Fortis: _____