



# **Address unprocessed payment authorizations**



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# Address Unprocessed Payment Authorizations

Log on to file ID C.

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Report ID: **FIN1750**  
File ID: **C**  
User ID:  
Curr Per:  
Next Per:

Parameter Description	Value
YTD only (Y), YTD and Current Month (C), YTD, Current and Next Month (A), Acct Per only (01-12)	A
Sort by Ck#/Acct (1), Acct/Ck# (2), Vendor#/Ck#/Acct (3), Vendor#/Acct/Ck# (4)	3
Include Reversal Transactions? (Y/N), or Voided Checks only (V)	Y
Select Computer Written Checks (C), District Written Checks (D), Both (B)	B
Include Payroll Deduction Checks? (Y/N)	Y
Include Transfer Checks? (Y/N)	N
Print Publish Report Only? (Y/N)	N
Include ONLY EFT Payment? (Y/N)	N
Include Reason in Publish Report? (Y/N)	
Select Paid checks (P), Unpaid checks (U), or blank for ALL	U
Select Vendor(s), or blank for ALL	<input type="text"/> ...
Select Bank Account Group(s), or blank for ALL	<input type="text"/> ...
Select Fund(s), or blank for ALL	<input type="text"/> ...

[Run Preview](#)  
[Clear Options](#)

Run the FIN1750 report to verify if there are unpaid payment authorizations. Any unpaid payment authorizations need to be processed or reversed.

Date Run:		Y-T-D Check Payments				Program: FIN1750				
Cnty Dist:		ISD				Page: 1 of 1				
From To		Sort by Vendor Number, Check Number, Account Code				File ID: C				
Accounting Period: A										
Check Nbr	Check Date	Vend Nbr	Payee	Organization	PO Nbr Fnd-Fnc-Obj.Sr-Ord-Prgr	Invoice Nbr	Typ Cd	Reason	Amount	EFT
		00014	WYLIE MANUFACTURI	001 School	508544		C	Supplies	75.90	N
				001 School	199-11-6395.21-001-022000					
				001 School	301741 ASSORTED		C	REVERSAL	-425.81	N
				001 School	199-11-6395.21-001-022200					
				001 School	301741 ASSORTED		C	GREEN HOUSE PLANTING	425.81	N
					199-11-6395.21-001-022200					
								<b>Check Total:</b>	<b>75.90</b>	
								<b>Vendor 00014 Total:</b>	<b>75.90</b>	
		00182	VOSS LIGHTING	041 School	301937	400757851001	C	REVERSAL	-165.91	N
				041 School	199-11-6395.00-041-011000					
				041 School	301937 400757851001		C	CLASSROOM SUPPLIES	165.91	N
				101 School	199-11-6395.00-041-011000					
				101 School	508152 388212900001		C	REVERSAL	-92.53	N
				101 School	199-11-6395.00-101-011000					
				101 School	508152 388212900001		C	TONER FOR ES OFFICE	92.53	N
				999 School	199-11-6395.00-101-011000					
				999 School	508152 387461203001		C	REVERSAL	-102.50	N
				999 School	199-36-6395.69-999-091000					
				999 School	508152 387461203001		C	TONER FOR ATHLETICS	102.50	N
				999 School	199-36-6395.69-999-091000					
				999 School	508543		C	Bulbs	200.00	N
					199-51-6316.00-999-099000					
								<b>Check Total:</b>	<b>200.00</b>	
								<b>Vendor 00182 Total:</b>	<b>200.00</b>	
		00190	VIRKIM, INC	001 School	508545		C	Supplies	37.92	N
				101 School	199-11-6395.00-001-011000					
				101 School	301886 000006278		C	REVERSAL	-199.99	N
				101 School	199-13-6239.RG-101-099000					
				101 School	301886 000006278		C	ROBOTICS CAMP FOR TE	199.99	N
					199-13-6239.RG-101-099000					
								<b>Check Total:</b>	<b>37.92</b>	
								<b>Vendor 00190 Total:</b>	<b>37.92</b>	
								<b>Grand Total:</b>	<b>313.82</b>	

End of Report

**Reverse an unprocessed payment authorization:**

Finance > Maintenance > Postings > Check Processing - PA

Retrieve all existing payment authorizations. Individually review and reverse each payment authorization as needed.

**Process a payment authorization:**

Finance > Maintenance > Check Processing > Print Checks

Maintenance > Check Processing SessionTime

**Print Checks** **Void Check**

**WARNING: If you choose to update files, export of Finance tables to a saved folder is highly recommended before running this process.**

Beginning Check Nbr:  Check Date:  **Preview**

Beginning EFT Reference Number: E

Fund:

Check Select Date Range: From:  To:

Apply any credit memos up to the amount of the total invoices?  Yes  No

Sort Vendors by Alpha or Numeric?

Type a **Check Date**.

Click **Preview** to view any outstanding items.

Maintenance > Check Processing SessionTimer: 59 min and 44 sec

**Print Checks** **Void Check**

Select vendors for printing checks. Click Next to view checks.

<input checked="" type="checkbox"/> Select	Vendor Number	Vendor Sort Key	Vendor Name	Check Amount	Trans Amount	Credit Amount	Separate Check	EFT Payment	PO/PA Number	Check Type	Check Notes
<input checked="" type="checkbox"/>	00261	UNITED REHAB SPECIALISTS, INC.	UNITED REHAB SPECIALISTS, INC.	4,000.00	4,000.00	0.00	N	N			
<input checked="" type="checkbox"/>	00190	VIRKIM	VIRKIM, INC	37.92	37.92	0.00	N	N			
<input checked="" type="checkbox"/>	00182	VOSS LIGHTING	VOSS LIGHTING	200.00	200.00	0.00	N	N			
<input checked="" type="checkbox"/>	00014	WYLIE MANUFACTURING CO.	WYLIE MANUFACTURING CO.	75.90	75.90	0.00	N	N			

Click **Next** and proceed as normal to process the checks.



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