INSTRUCTIONS FOR COMPLETION OF FORM STARS TM-96 STARS SIGN-ON REQUEST FORM (Rev. 12-98)

The following instructions are for completion of the request for an access sign on to the Statewide Accounting Reporting System (STARS). In order to access STARS, the user must have access to CICS and possess a TOPSECRET SIGN-ON. STARS sign-ons are issued by the Division of Accounts and Reports, 3rd Floor, Landon State Office Building, Topeka, KS 66612-1248.

The *Requested By* blank should be completed with the name of the person making the request for the sign-on. *Agency Name* should contain the name of the state agency, and the requester's telephone number should be entered in the *Telephone No.* blank.

The *Authorized By* blank is provided for internal agency control purposes and generally contains the name of the head of the agency or other designated official. The authorizing official's *Title* and the *Date* of the request complete the remainder of the general information block.

Function should be completed with either *A*(dd), *C*(hange), or *D*(elete), depending upon the nature of the request. If a change or deletion is being requested, enter the employee's *Operator ID* (but not the password) in the *A&R USE* block.

The three-digit *Agency* number must be included on the request to establish the agency-level security for the user.

The user's *Name* should be completed to a maximum of 20 characters. First name, middle initial, and last name are preferred.

Enter an "X" in each *Operator Class* field for which a sign-on is being requested. If the requested class is not listed, use the "OTHER" field, indicating the title and number of the operator class as shown in Descriptor Table D66. Please note that Operator Class 23 includes expenditure transactions only; Operator Class 21 includes most of these transactions, as well as Pre-encumbrance transactions. If a "0" or "blank" is selected for *Accounting Transactions,* an Operator Class need not be selected since the access will not permit transaction processing.

Printer ID should contain the IBM site-printer designation where voucher printing is to be done. Generally, this will consist of the last four characters of the printer VTAM number or a four digit number based on the IP address.

On-line Financial Inquiry permits the user to review cumulative or activity inquiries from the financial files (account balances, etc.). If the user is to be allowed such access, complete this field with "A".

File Inquiry Menus
STARS Voucher Entry Training

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STARS
File Inquiry Menu

RECORD INQUIRIES   FINANCIAL INQUIRIES

60 AVERAGE DAILY CASH FILE (AD)   71 VENDOR PAYMENT FILE (VP)
61 ALLOCATION FILE (AL)   72 APPROPRIATION FILE (AP)
62 APPROPRIATION FILE (AP)   73 CASH CONTROL FILE (CC)
63 CASH CONTROL FILE (CC)   74 DOCUMENT FILE (DF)
64 DOCUMENT FILE (DF)   75 SUBSIDIARY FILE (SF)
65 GENERAL LEDGER FILE (GL)   76 GENERAL LEDGER FILE (GL)
66 GRANT FILE (GP)   77 GRANT FILE (GP)
67 OPERATING FILE (OF)   78 ALLOCATION FILE (AL)
68 VOUCHER/WARRANT WRITG FILE (WW)   81 PROJECT FILE (PJ)
69 SUBSIDIARY FILE (SF)   82 PROPERTY FILE (PF)
80 PROJECT FILE (PJ)   84 DOCUMENT DETAIL INQUIRY (VP)
85 AUDIT TRAIL INQUIRY

99 SIGN OFF

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STARS
Table Maintenance Menu

20   BUDGET UNIT
21   VENDOR EDIT
2A   VENDOR SORT SEQ. INDEX
2N   VENDOR NUMERIC INDEX
22   COST ALLOCATION
23   DESCRIPTOR
24   INDEX CODE
25   ORGANIZATION CONTROL
26   PROGRAM COST ACCOUNT
27   PROJECT CONTROL
29   GRANT CONTROL
83   ABA NUMBER LISTING
92   GRANT/PROJECT BILLING REQUEST
93   RECURRING TRANSACTION REQUEST
99   SIGN OFF

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STARS
Financial Transaction Data Entry Menu

50   ENTER ACCOUNTING TRANSACTION BATCH
51   RECALL A BATCH FOR CORRECTION
52   VIEW OR PRINT A BATCH
53   VIEW OR PRINT BATCH HEADERS
54   ENTER ERROR CORRECTIONS
55   RECURRING TRANSACTIONS
99   SIGN OFF

GUIDELINES FOR ADDING/CHANGING TO THE VENDOR FILE
(Rev. August 2006)

VENDOR NUMBER - 9 digit social security number for an individual or 9 digit federal employer identification number (FEIN). State agencies should use their agency number followed by six zeroes. Also, Canadian vendors use a 9 digit number referred to as a 'government number'. **Exceptions must be approved by Accounting Services**.

Note: Detailed vendoring information is provided in Filing No. 11,749 of the Accounts and Reports Policy and Procedure Manual.

SUFFIX NUMBER - Used to show a different mailing address (some vendors have more than one) or name (such as a different division, etc.) **Change of address should not be added as another suffix**. A change request (TM-21) should be sent to Accounting Services (with backup) to correct the existing record. 00 - 99 are available. **Alpha exceptions must be approved by Accounting Services**.

DUE DATE - Unused

VENDOR TYPE -1. Employee (SSN)
          2. Federal Agency
          3. State Agency (any state)
          4. Local Government - (cities, counties, public libraries, school districts)
          5. Vendor-Business (FEIN number)
          6. Vendor-Individual (social security number)
There is an edit on this field requiring the vendor type be the same for all suffixes within a vendor number.

VENDOR STATUS - 0 = Active 1 = Inactive 2 = Inactive due to address when incorrect address detected.

MIN BUS - Unused

DISADV BUS - Unused

WOMEN BUS - Unused

SORT SEQUENCE - The 2A screen (alphabetically sorted) in the STARS vendor file is sorted by the sort sequence, not by the vendor name. Please use the following guidelines:

    a. Individuals (Vend.Type 1 or 6) - **LASTNAME,FIRSTNAME** (ex. John Smith = **SMITH,JOHN** or George Smith = **SMITH,GEOR**) - skip the space in between the comma and the first name since the field is limited to 10 spaces and we need as much information as we can get in there. The comma is being used to distinguish the last name from the first since it is hard to tell in some cases.

    b. Businesses - Type the first 10 digits of the vendor name except: 1) names that have 8 or 9 digits in the first word, skip the space in between, 2) "Cities of", just use the name of the city, 3) Acceptable abbreviations are Amer = American, Intl = International, KC = Kansas City, Natl = National, NE = Northeast, NW = Northwest, SE = Southeast, SW = Southwest, Univ = University, US = United States.

AGENCY/DIV. - Three digit agency number in most cases.

1099 INDICATOR - Identifies if this is the type of organization that has to be reported on 1099's regardless of whether your payments to them are reportable or not. Basically all corporations with the exception of medical corporations are exempt from 1099 reporting. Mark yes in this field unless you can tell in the name (inc, corp) that it is a corporation other than medical. When in doubt, enter Y. **ALL vendor types 1 and 6 must be Y in the 1099 indicator**. Vendor types 2, 3 and 4 should be N. There is an edit on this field requiring the 1099 indicator be the same for all suffixes within a vendor number.

VENDOR-NAME1 - Enter the vendor name the same way that it will appear on the warrant. You can enter SMITH,JOHN in the sort sequence and still have JOHN SMITH on the warrant by entering JOHN SMITH in the vendor name. The preferable way for this field is First Name, Middle Initial, Last Name. (**Note: Do not use periods or commas in the Vendor-Name1 line.**)

VENDOR-NAME2 - If needed. May be used for additional name or address.

VENDOR-ADDRESS - A 'Postal Correct' address is required. The STARS Vendor Table address verification procedure is performed during the nightly processing of STARS transactions.

CITY - Required field.

STATE - Required field. ** can be used for foreign vendors.

ZIP-CODE - 5 digit zip code. The zip +4 is automatically added during the STARS Vendor Table address verification procedure performed during the nightly processing of STARS transactions.

PHONE AND CONTACT NAME Optional fields for the vendor phone number and contact person. The contact name field is also used by Accounting Services as a memo field to show why a record has been inactivated, etc.

EFFECTIVE START DATE - Defaults to system date.

EFFECTIVE END DATE- Leave blank.

EXPLANATION (TM-21) - If any vendor information is being changed or deleted, an explanation describing the reason for the change or deletion should be entered in this area of the TM-21. If a vendor number is being changed, a copy of form W-9, a copy of an invoice reflecting the correct FEIN, or a letter on company letterhead and signed by someone from the company should be attached to form TM-21. If a vendor-business name or address is changing, a copy of a letter, invoice, or other source of information from the vendor should be attached. If change in address has been confirmed via telephone call to vendor, a name and phone number of the person talked to should be provided. The first numeric suffix in the vendor file is the one 1099's are sent to if a 1099 is issued, therefore if an address change is needed, the existing record in the vendor file should be corrected rather than another suffix added.

DA-130 "Authorization for Electronic Deposit of Vendor Payment" forms should be submitted to Accounting Services to add the banking information onto the vendor record in the vendor file. **Banking information may be added at the agency to new records, but the electronic deposit function will be suspended until the DA-130 is received in Accounting Services.**

ABA NUMBER - 9 digit number usually located on the lower left corner of check.

FINANCIAL INSTITUTION - Determined by ABA number and automatically entered when vendor record added to STARS.

ACCT NUMBER - Bank account number

ACCT TYPE - C=checking acct, S=savings acct

PRENOTE IND - Enter "N" when entering a new vendor with banking information. The 'Prenote' process has been eliminated.

PRENOTE DATE - Leave blank.

EFFECTIVE START DATE - Defaults to system date.

EFFECTIVE END DATE - Leave blank. STARS will automatically assign a date to this field.