ADOA – General Accounting Office

QUICK REFERENCE GUIDE: PROCESSING FINGERPRINT PAYMENT TRANSFERS

PROCESSING FINGERPRINT PAYMENT TRANSFERS

Table of Contents

PROCESSING FINGERPRINT PAYMENT TRANSFERS **3**

FINGERPRINT CLEARANCE CARDS – ITI/ITA 3
INITIATING AGENCY ACTIVITY 4
ITI APPROVER AGENCY ACTIVITY 6
AGREEMENT AGENCY ACTIVITY (PSA COMPLETING THE ITA) 6
CRIMINAL HISTORY – NO CLEARANCE CARD - IETAT 7
PROCEDURE 8

PROCESSING FINGERPRINT PAYMENT TRANSFERS

Processing Fingerprint Payment Transfers

There are two processes for submitting payments for Fingerprints to the Department of Public Safety (PSA); Fingerprint Clearance Cards and Criminal History – No Clearance Card. PSA recognizes all fees as revenues and will only accept the following Event Types:

- INZ2 – Revenue Transfer
- INZ3 – Expenditure to Revenue Transfer

Fingerprint Clearance Cards – ITI/ITA

If you submit the following application(s) with your fingerprint cards and receive a clearance card, you will use the ITI/ITA process to pay the Applicant Clearance Card Team through PSA. The paying agency will be creating the ITI with PSA being the ITA agency. Once you have completed the ITI/ITA process and your agency has created an ITA for PSA, you may submit your packet including your application, fingerprint card, and the application submission form (obtain from the Applicant Clearance Card Team). The ITA will be processed as soon as possible. You no longer need to divide your payment into three lines, this can be done when the PSA completes their portion of the ITA.

You can check the status of the ITI and ITA by searching the document catalog.

APPLICATION NUMBER

ARIZONA DEPARTMENT OF PUBLIC SAFETY
APPLICATION FOR A FINGERPRINT CLEARANCE CARD
Applicant Clearance Card Team ☎ (602) 223-2279
Mailing address: P.O. Box 18390, Phoenix, AZ, 85005-8390
Physical address: 2320 N. 20th Ave. Phoenix, AZ 85009
Visit www.azdps.gov/services/fingerprint for FAQ's or to check the status of your application.

Type or print all information in blue or black ink. All fields marked with a ★ are required. Submit original white copy only to DPS. Reproductions will not be accepted.

★Your Full Legal Name (Last, First, Middle)-Print clearly				Social Security Number		Phone Number w/Area Code	
★Date of Birth M M D D Y Y Y Y	★Race	★Sex ☐ Female ☐ Male	★Height	★Weight	★Eye Color	★Hair Color	★Place of Birth
★Applicant's Complete Mailing Address (Applicant's address only)-Print clearly				★City		★State	★Zip Code
Name of Employer and/or Agency-Print clearly (If unknown or student leave blank)						Employer's Phone Number w/Area Code	
Employer and/or Agency Mailing Address-Print clearly				City		State	Zip Code
Applicant's e-mail address-Print clearly			★ Applicant's Signature * X			★Date	

*I authorize custodians of records to release information to the Arizona Department of Public Safety for the purpose of processing my application for a Fingerprint Clearance Card.

☐ Check here if paid employee. Fee is $67.00	☐ Check here if volunteer or **student where noted. Fee is $65.00	Fee must be in the form of a money order, cashier's check, check drawn on a business account made payable to "DPS", or a State of Arizona Companion Transaction Entry/Transfer. DPS does NOT accept cash, personal checks, debit or credit cards.

ARIZONA DEPARTMENT OF PUBLIC SAFETY
APPLICATION FOR A FINGERPRINT CLEARANCE CARD
REQUIRING IDENTITY VERIFIED PRINTS (IVP)
Applicant Clearance Card Team ☎ (602) 223-2279
Mailing address: P.O. Box 18390, Phoenix, AZ, 85005-8390
Physical address: 2320 N. 20th Ave. Phoenix, AZ 85009
Visit www.azdps.gov/services/fingerprint for FAQ's or to check the status of your application.

APPLICATION NUMBER

Type or print all information in blue or black ink. All fields marked with a ★ are required. Submit the original white copy only to DPS. Reproductions will not be accepted.

★Your Full Legal Name (Last, First, Middle)-Print clearly	Social Security Number	Phone Number w/Area Code

★Date of Birth	★Race	★Sex	★Height	★Weight	★Eye Color	★Hair Color	★Place of Birth
M M D D Y Y Y Y		☐ Female ☐ Male					

★Applicant's Complete Mailing Address (Applicant's address only.)-Print clearly	★City	★State	★Zip Code

Name of Employer, Agency or School-Print clearly (If unknown or student leave blank)	Employer's Phone Number w/Area Code

Employer , Agency or School's Mailing Address-Print clearly	City	State	Zip Code

Applicant's e-mail address-Print clearly	★ Applicant's Signature **	★Date
	X	

**I authorize custodians of records to release information to the Arizona Department of Public Safety for the purpose of processing my application for a Fingerprint Clearance Card.

Check the box to indicate why you are applying. Application can not be processed without this information.

☐ AZ Board of Education (Teacher or Other Certification) ARS §15-534 (Fee is $67.00)	☐ Tutor or Teacher Preparation Programs ARS §15-534	☐ Charter School Instructor ARS §15-183	☐ Public and/or Charter School Contractor, Subcontractor or Vendor and their Employees ARS §15-512	☐ Public and/or Charter School Non-certificated personnel ARS §15-512

☐ Check here if paid employee. Fee is $67.00	☐ Check here if volunteer. Fee is $65.00	Fee must be in the form of a money order, cashier's check, check drawn on a business account made payable to "DPS", or a State of Arizona Companion Transaction Entry/Transfer. DPS does NOT accept cash, personal checks, debit or credit cards.

Initiating Agency Activity

Party 1 creates the ITI document to create an Internal Transaction Initiator (ITI) document.

Log into **AFIS. Navigate** to the Document Catalog

Create ITI document following these instructions or what your agency has provided

1. In the **Code** field, enter ***ITI***
2. Click **Create**
3. In the **Dept**. field, enter ***your 3 letter agency code***
4. Click **Auto Number** checkbox to generate a unique ID
5. Click **Create**. A new document is generated. Note your ITA Document number for later reference.

Complete the **Header** component. At a minimum, enter the following information:

6. Initiator
   - **Receiver/Buyer** i.e. the 1st Party **sending cash (Very Important - this is not the default; you must make this change.)**
7. Insert new **Vendor** Line for as many accounting lines as you need

Complete the **Accounting** component for each Vendor line

On the **General Information** tab, at a minimum, enter the following information:

- Event Type (see table below) – please note that both agencies have to have the same Event Type. If the other agency does not agree, the document will be rejected and have to be corrected, resubmitted, and reapproved.

- Line Amount – Enter the amount being paid. $67.00 **per** single standard application and $65.00 **per** single Volunteer application. Example: 30 Volunteer applications = $1,950.00. The line amount would be $1,950.00.

On the **Reference** tab, at a minimum, enter the following information:

- Enter IPO encumbrance (if needed)

On the **Fund Accounting** tab or enter the Function on the **Detail Accounting** tab, at a minimum, enter the following information:

- Department
- Fund (if not inferred from function)
- Unit (if not inferred from function)
- Appr Unit (if not inferred from function)
- Revenue (if applicable)
- Object (if applicable)

On the **Detail Accounting** tab, at a minimum, enter the following information:

- Function
- Task (if not inferred from function)

Attach any necessary supporting documentation

- Attach documentation to support document, by selecting File (lower right corner), then Attachments, then Upload, Browse for the correct document to attach, Upload, verify the correct file is listed, return to document.

Validate ITI document

Confirm that the document validated successfully in the upper left-hand corner. If it did not, please correct or seek additional support.

Submit ITI document

Note: The document will be handled through workflow and will be pending the Department Approver

ITI Approver Agency Activity

Approver will **Locate** ITI document in the Document Catalog.

Copy Forward ITI document to create an ITA document, at a minimum, enter the following information:

- Doc Department = ***PSA***
- Doc ID, enter ***ACCT***
- Click the **Auto Numbering** check box
- Target Doc Type = **ITA**

1. Click **OK**. The ITA document opens
2. Attach any necessary documents
3. You can save or validate, but will be unable to submit, as that is for PSA

Paying agency will send PSA Document ID number with their application and fingerprints to the Department of Public Safety.

Agreement Agency Activity (PSA Completing the ITA)

Locate the **ITA** in the Document Catalog (This is the individual who is processing the rest of a transfer, not Finance staff).

At a minimum, browse on the following information:

- ITA*
- Dept - PSA
- Held status

Edit and Complete the **2nd Party Account** component.

On the **General Information** Tab, at a minimum, enter the following information:

- Event Type (must match ITI) – if incorrect, notify ITI agency and get it corrected before submitting for approval.
- Line Amounts

Verify the **Initiator Reference**, under the Initiator Reference tab, make sure the paying agency has their 3 letter agency code under Initiator Doc Dept. This is where their ITI document code can be found under the Initiaor Doc ID.

On the **Fund Accounting** tab or enter the Function on the **Detail Accounting** tab, at a minimum, enter the following information:

- Department = PSA
- Revenue

On the **Detail Accounting** tab, at a minimum, enter the following information:

- Function

Validate ITA document

- Confirm that the document validated successfully in the upper left-hand corner. If it did not, please see your accounting supervisor; verify correct elements such as Fund, Appropriation, etc.

Submit ITA document

Note: The document will be handled through workflow and will be pending the Department Approver (Finance). It is your responsibility to verify the transaction was completed and the funds transferred. Please note that errors can occur on either side of the transaction which will cause the transfer to fail. Until both the ITI and the ITA are in final status, the transfer of funds has not occurred. If a document fails, it can be returned to you for corrections and resubmission.

Note: Because the paying agency is the initiator, the final validations for their funding does not happen until the ITA is approved. If their funding cannot post due to a funding issue, appropriation or allotment problem, budget problem, etc., both documents (the ITI and the ITA) goes into a rejected status. The funds did not transfer, and the payment process must be restarted and go through both agencies and both approvals again.

Criminal History – No Clearance Card - IETAT

If you submit the following inventory sheet form with your fingerprint cards and receive criminal history; you will use the IETAT process. This process can only be used for the $22 and $20 fees. GAO is the approver of these transfers. If you have a state level only check or any other approved dollar amount, you will need to use the ITI/ITA process (See previous procedure).

The IETAT allows agencies who need to pay for the goods/services, in this instance Criminal History – No Clearance Card Fingerprinting, to initiate a payment without the need for the agency receiving the funds to participate in the creation/validation/submission of the document. The paying agency will initiate an IETAT, and will enter their agency's information in the 2nd Party Accounting section. The paying agency will also complete the Exchange Details section of the document by entering the correct Accounting Template for the party they are paying and amount of the payment. The COA elements for the agency receiving cash will be provided via the Accounting Template selected. The Accounting Template currently available for this process is:

- **FINGERPRNT** – For payment of Fingerprinting Services charges to the Department of Public Safety

All IETAT documents will be routed through workflow for departmental and GAO review for appropriateness and accuracy prior to approval. Once the IETAT is approved the funds are automatically released to PSA. You may send your fingerprint cards, inventory sheet, and screen print of the IETAT Header, General Information tab as soon as GAO has approved your IETAT. **Please put the inventory sheet number as your document name or document description.**

You can check the status of your IETAT by searching the document catalog.

ARIZONA DEPARTMENT OF PUBLIC SAFETY

NON-CRIMINAL JUSTICE APPLICANT FINGERPRINT CARD INVENTORY SHEET

Inventory Sheet Number 732840

Applicant Team ☎ (602) 223-2223

Applicant Team
Mail Drop 2250
P.O. Box 18430
Phoenix, AZ 85005-8430

Date	Submitting Agency	Submitting Agency's ORI/OCA Number

Type of Applicant(s) (Check One Box Only)
☐ Regular Applicants ☐ Resubmits (No Fee Required)
☐ Volunteers ☐ State Level Only

Direct Phone Number of Contact Person

	Applicant's Name	Date of Birth
1		
2		
3		
4		
5		
6		

✓ Applicant Fingerprint Card Submission Checklist

☐ ↑ Fill out the top portion of this inventory sheet with your agency's information. *All fields are required.*

☐ ↖ Check the box that corresponds to the type of applicant(s) being submitted with this sheet. Only one type of applicant can be submitted per inventory sheet. If you have a mix of regular applicants, volunteers, resubmits and/or state level only applicants they *must* be submitted with separate inventory sheets

Procedure

Log into **AFIS**. Navigate to the **Document Catalog.**

Create IETAT document.

1. In the **Code** field, enter ***IETAT***
2. Click **Create**
3. In the **Dept**. field, enter ***your department code***
4. Click **Auto Number** checkbox to generate a unique ID
5. Click **Create**. A new document is generated

Complete the **Header** component. At a minimum, enter the following information:

- Document Name or Document Description
  - **Inventory Sheet Number**
- Record Date
- Initiator
  - **Must be set to Provider/Seller**

Complete the **Exchange Details** component, Click the **Insert New Line**

On **General Information** tab, enter the following information on the:

- Event Type
  - INZ3 or INZ3
- Line Amount
  - Accounting Template
    - FINGERPRNT

Complete the **2nd Party Accounting** component

On the **General Information** tab, at a minimum, enter the following information:

- Line Amount

On the **Fund Account** tab, at a minimum, enter the following information:

- Department
- Fund (if not inferred from function)
- Unit (if not inferred from function)
- Appr Unit (if not inferred from function)
- Object

On the **Detail Accounting** tab, at a minimum, enter the following information:

- Function (if used)
- Task (if not inferred from function)

Validate IETAT document

- Confirm that the document validated successfully in the upper left-hand corner. If it did not, please see your accounting supervisor

Submit IETAT document

Note: The document will be handled through workflow and will be pending the Department Approver. The document will then be routed to GAO for review and approval.