

**CSULB Departmental Copier Program
Instructions for Filling out Monthly Copier Billing Form**

These instructions will give a step- by- step explanation of how this form should be completed.

Dept. Req.#: This space is optional for those departments who choose to assign a requisition number to the expense being reported on the form. This number is for the submitting departments' information only and is not used by the Copier Program.

Date: Provide the current date. (Billing reports should be sent to the Copier Program office by the 15th of each month.)

Department: Provide the department location of the copy machine used for copies made.

Person Submitting Report: Provide the name of the person preparing the billing report.

Copy Machine Serial Number: Provide the serial number of the copier that the reported copies were made on. If you are reporting for more than one copier you may use the additional spaces provided for that purpose.

Current Copier Meter Reading: Provide the current meter reading of the copy machine being reported.

Less Previous Copier Meter Reading: Provide the last reported meter reading.

Equals Total Copies for Current Month: This is a calculated field that will show the sum of the previous meter reading subtracted from the current meter reading, which is the total copies made for the current month.

NOTE TO THOSE REPORTING FOR MORE THAN ONE COPY MACHINE: You may add the copycounts together from more than one copier and show the total(s) in the billing line(s) below. Keep the individual copycounts for your internal office use; the Program office only needs totals by account number for billing purposes.

Copier Code #: (If not reporting for individual copy machine passwords skip these spaces.) If reporting individual copy machine password codes, use these spaces to identify each copier code or groups of codes being reported/billed on that line. (Example: #011, or #1 – 10) For several copier codes being paid from the same account you may add the copycounts together & report on the same line.

Issued To: Use these spaces to identify whom each copier code (or groups of codes) belongs to.

Fund #: This is a required field for all copy reports & is for your 5-digit fund number. There must be a fund code for each line of copies being reported.

Dept.ID: This is a required field for all copy reports & is for your 5-digit Dept. I.D. number. There must be a Dept.ID referenced for each line of copies being reported.

Program Code: This is an optional field for those who have a 5-digit program code to report as part of their billing account number.

Project Code: This is an optional field for those who have a 15-digit project code to report as part of their billing account number.

Class Code: This is an optional field for those who have a 5-digit class code to report as part of their billing account number.

C O N T I N U E D

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Total Copies: This is a required field for all copy reports. This is for the total number of copies to be billed to the chartfield referenced on that same line.

Total Charge: This is an automatic field that will compute and display the total charge by multiplying the total number of copies input by .0475 each.

Approved By: For reports sent by email this space is not necessary as they may be emailed first to the appropriate approving official, and when that report is forwarded to the Copier Program mailbox (copierprogram@csulb.edu) by that person it will serve as approval. This space is for those who wish to print out the form and have a hard copy signed by their approver.

NOTE: The account # for Copier Program charges will always be 660930. This number will not appear on the billing form but will automatically be included when the billing amounts are processed.

Total of All Copies: This is an automatic field that will add up all the copycounts listed in the "Total Copies" column and show the grand total of all copies being reported on the form.

Copier Key Operator Satisfaction Survey: This field is for the keyoperator to communicate to the Program office their level of satisfaction with their copier for that billing period. The key operator should check the appropriate rating (Excellent, Good, O.K. or Poor) and note any additional comments in the space provided.

Billing Form Continuation – Page 2: This continuation form is for those who need more than the 23 account number lines on page 1. The instructions for page 1 also apply to page 2.

If you have questions or would like assistance if filling out this form please call the Program office at x. 55329 or 57558.