



CITY OF CHICAGO DELEGATE AGENCY

iSupplier (eProcurement) Invoice Creation and Supplier Site Form Workshop



Invoicing and iSupplier Agenda

- ❖ New Supplier Site Form

 - ❖ Coming Soon ~Anticipated Release July 15, 2022

- ❖ Invoice Creation - Walk Through

 - ❖ View Orders and Releases

 - ❖ Invoice Creation/Vouchering

 - ❖ View Payments

Supplier Site Form

Purpose of New Form:

- Advancing the City's Equity Goals
- Improving and Leveraging Data
- Informed Funding Decisions and Distribution

Requirement:

- 1) Location of Headquarter and Service Site
- 2) Size of Organization
- 3) Amount of Service

Effective July 15, 2022


Required for All Delegate Agency Contracts

iSupplier Portal with Invoice Creation

- Select “**City of Chicago iSupplier Portal with Invoice Creation.**”
- Expand option to select **Home Page**



CITY OF CHICAGO E-Business Suite:JADE Favorites ▾ Logout Preferences Help


Enterprise Search Search Results Display Preference ▾

Logged In As 

[Oracle Applications Home Page](#)

Main Menu Personalize

 [City of Chicago iSupplier Portal with Invoice Creation](#)
 [Home Page](#)

 [City of Chicago Online Bidding](#)

Worklist Full List

From	Type	Subject	Sent	Due
There are no notifications in this view.				
✓ TIP Vacation Rules - Redirect or auto-respond to notifications.				
✓ TIP Worklist Access - Specify which users can view and act upon your notifications.				

Orders and Finance Tab

- **Orders:** View Contracts and Releases
- **Finance:** Create Invoices and View Payments

CITY OF CHICAGO iSupplier Portal

Home Orders Shipments Admin Finance

Search PO Number Go

Notifications [Full List](#)

Subject	Date
No results found.	

View Contracts and Releases

Create Invoices, View Invoices & Payments

Orders

- [Agreements](#)
- [Purchase Orders](#)
- [Purchase History](#)

Receipts

- [Receipts](#)
- [Returns](#)

Invoices

- [Invoices](#)

Payments

- [Payments](#)

Orders Tab

- View Agreements
- Find Global and Standard PO-Release
- Export Information

CITY OF CHICAGO iSupplier Portal

Home **Orders** Shipments Admin Finance

Purchase Orders | Agreements | Purchase History | Work Confirmations

Purchase Orders

Export

Views

View Go

Select Order:

Previous 1-25 Next 25

Select	PO Number	Rev	Operating Unit	Document Type	Description	Order Date	Currency	Amount	Status	Change Request Status	Acknowledge By	Attachments
<input type="radio"/>	97430	0	CITY OF CHICAGO - GRE	Standard PO		20-Mar-2019 17:17:12	USD	80,590.00	Open			
<input type="radio"/>	96851	0	CITY OF CHICAGO - GRE	Standard PO		13-Mar-2019 18:20:42	USD	30,560.00	Open			
<input type="radio"/>	96849	0	CITY OF CHICAGO - GRE	Standard PO		13-Mar-2019 18:19:14	USD	109,709.00	Open			
<input type="radio"/>	96000	0	CITY OF CHICAGO - GRE	Standard PO		05-Mar-2019 15:01:12	USD	67,000.00	Open			
<input type="radio"/>	85468	0	CITY OF CHICAGO - GRE	Global Blanket Agreement	DFSS-CORP-HL-PSH:	29-Jan-2019 09:31:38	USD	414,538.00	Open			
<input type="radio"/>	85155	0	CITY OF CHICAGO - GRE	Global Blanket Agreement	DFSS-CDBG-HL-SPC:	29-Jan-2019 09:31:16	USD	161,180.00	Open			

Finance Tab

- Create Invoices
- View Invoices
- View Payments

CITY OF CHICAGO iSupplier Portal

Home Orders Shipments Admin **Finance**

Create Invoices | View Invoices | View Payments

Invoice Actions

Create Invoice With a PO

Search

Note that the search is case insensitive

Supplier **DEBORAH'S PLACE**

Invoice Number

Invoice Date From
(example: 18-Jul-2019)

Invoice Status

Release PO Number

Invoice Amount

Invoice Date To

Currency

Invoice Number	Invoice Date	Invoice Currency Code	Invoice Amount	Release PO Number	Status	Withdraw	Cancel	Update	View Attachments
No search conducted.									

Create Invoice Option

- Select “Finance”
- Under “Create Invoice” and “Invoice Actions”
- Navigate to the Right of the Screen
- Select “Create Invoice with a PO”
- Select “Go”

CITY OF CHICAGO iSupplier Portal

Home Orders Shipments Admin **Finance**

Navigator Favorites Home Logout Preferences Help

Create Invoices | View Invoices | View Payments

Invoice Actions


Create Invoice With a PO

Search

Note that the search is case insensitive

Supplier **DEBORAH'S PLACE**


Invoice Number

Invoice Date From 
(example: 18-Jul-2019)

Invoice Status

Release PO Number

Invoice Amount

Invoice Date To 

Currency

Invoice Number	Invoice Date	Invoice Currency Code	Invoice Amount	Release PO Number	Status	Withdraw	Cancel	Update	View Attachments
No search conducted.									

New Electronic Invoice and Tax Certification Language in iSupplier

The below screenshots outline the new certification requirements in iSupplier, which will replace the existing electronic forms that are required with each invoice.

CITY OF CHICAGO
iSupplier Portal

Navigator
 Favorites
Home Logout Help Preferences

Home Orders Shipments Admin Finance

Create Invoices View Invoices View Payments

Invoice Actions

Create Invoice
With a PO
Go

TIP In order to continue, please review and complete the certification below and acknowledge the certification by entering your name, title, and clicking the acknowledgement checkbox.

Search

Note that the search is case insensitive

Supplier **RINCON FAMILY SERVICES**

Invoice Number

Invoice Date From

Invoice Status

(example: 14-Jul-2021)

Go Clear

Release PO Number

Invoice Amount

Invoice Date To

Currency

Invoice Number	Invoice Date	Invoice Currency Code	Invoice Amount	Release PO Number	Status	Withdraw	Cancel	Update	View Attachments
No search conducted.									

I certify that by accessing the City of Chicago's iSupplier system using my assigned responsibilities from an authorized member of the organization, that I am authorized by the organization to submit requests for reimbursement and reports to the City of Chicago. It is expected that all users with access into the iSupplier system maintain unique, individual, and secure passwords to access the iSupplier system. The City is not responsible for any unauthorized access into the system or submission of any requests for reimbursement or reports as a result of the Organization granting access to users.

* Name * Title ☐ * Acknowledge

Create Invoice
With a PO
Go

New Electronic Invoice and Tax Certification Language in iSupplier

The below screenshots outline the new certification requirements in iSupplier, which will replace the existing electronic forms that are required with each invoice.

CITY OF CHICAGO
iSupplier Portal

Home Logout Help Preferences

Home Orders Shipments Admin Finance

Create Invoices View Invoices View Payments

Invoice Actions

Create Invoice
With a PO
Go

TIP In order to continue, please review and complete the certification below and acknowledge the certification by entering your name, title, and clicking the acknowledgement checkbox.

Search

Note that the search is case insensitive

Supplier **RINCON FAMILY SERVICES**

Invoice Number

Invoice Date From

(example: 14-Jul-2021)

Invoice Status

Go Clear

Release PO Number

Invoice Amount

Invoice Date To

Currency

Invoice Number	Invoice Date	Invoice Currency Code	Invoice Amount	Release PO Number	Status	Withdraw	Cancel	Update	View Attachments
No search conducted.									

I certify that by accessing the City of Chicagos iSupplier system using my assigned responsibilities from an authorized member of the organization, that I am authorized by the organization to submit requests for reimbursement and reports to the City of Chicago. It is expected that all users with access into the iSupplier system maintain unique, individual, and secure passwords to access the iSupplier system. The City is not responsible for any unauthorized access into the system or submission of any requests for reimbursement or reports as a result of the Organization granting access to users.

* Name * Title ☒ * Acknowledge

Create Invoice
With a PO
Go

Search for Active Release PO Budget Lines

- Enter “Release PO Number” in the Search Box
- Select “Go”
- Select “Next”

CITY OF CHICAGO iSupplier Portal

Home Orders Shipments Admin **Finance** Navigator Favorites Home Logout Preferences Help

Create Invoices View Invoices View Payments

Purchase Orders Details Manage Tax Review and Submit

Create Invoice: Purchase Orders

Cancel Step 1 of 4 Next

Search

Note that the search is case insensitive

Release PO Number X ⓘ

Release PO Date (example: 18-Jul-2019)

Go Clear

Advanced Search

Select	PO Number	Line	Shipment	Advances or Financing	Item Description	Item Number	Supplier Item Number	Ordered	Received	Invoiced	Unit UOM	Price	Ship Curr To	Organization	Packing Slip	Waybill
	No search conducted.															

Cancel Step 1 of 4 Next

Adding Budget Lines to an Invoice

- Select the appropriate budget Line (0005-Salaries, 0044-Fringes, etc.)
 - Must match documentation
- View Ordered Amount and Invoiced Amount to Determine Available Balance
- Click “Next”

Home Orders Shipments Admin **Finance**

Create Invoices | View Invoices | View Payments

Purchase Orders Details Manage Tax Review and Submit

Create Invoice: Purchase Orders

Cancel Step 1 of 4 Next

Search

Note that the search is case insensitive

Release PO Number 97430

Release PO Date (example: 18-Jul-2019)

Go Clear

Advanced Search

Select Items: Add to Invoice

Select All | Select None

Select	PO Number	Line	Shipment	Advances or Financing	Item Description	Item Number	Supplier Item Number	Ordered	Received	Invoiced	Unit Price	Curr	Ship To	Organization	Packing Slip	Waybill
<input type="checkbox"/>	97430	1	1	<input type="checkbox"/>	0005-PERS			62012	0	20670.72	USD 1	USD	050-2515 HOMELESS SERVICES	CITY OF CHICAGO - GRE		
<input type="checkbox"/>	97430	2	1	<input type="checkbox"/>	0044-Fringe Benefits			11252	0	3787.17	USD 1	USD	050-2515 HOMELESS SERVICES	CITY OF CHICAGO - GRE		
<input type="checkbox"/>	97430	3	1	<input type="checkbox"/>	0801-Indirect			7326	0	2446.34	USD 1	USD	050-2515 HOMELESS SERVICES	CITY OF CHICAGO - GRE		

Cancel Step 1 of 4 Next

Supplier Site Form

Warning Message and Acknowledgement

The screenshot displays the City of Chicago iSupplier Portal interface. At the top, the header includes the text "CITY OF CHICAGO iSupplier Portal" and navigation links: "Home", "Logout", "Preferences", "Personalize Page", and "Diagnostics". Below this, a secondary navigation bar contains "Home", "Orders", "Shipments", "Admin", and "Finance". A third bar shows "Create Invoices", "View Invoices", and "View Payments". A red-bordered box highlights a warning message: "Warning: You are required to complete the Supplier Site Information form in order to proceed to invoicing. Do you want to proceed?". To the right of the message are "No" and "Yes" buttons, with the "Yes" button also highlighted by a red border. The footer contains "About this Page" on the left and "Copyright (c) 2006, Oracle. All rights reserved." on the right.

CITY OF CHICAGO iSupplier Portal

Home Logout Preferences Personalize Page Diagnostics

Home Orders Shipments Admin Finance

Create Invoices | View Invoices | View Payments

Warning
You are required to complete the Supplier Site Information form in order to proceed to invoicing. Do you want to proceed?



No Yes

Home Orders Shipments Admin Finance Home Logout Preferences Personalize Page Diagnostics

About this Page Copyright (c) 2006, Oracle. All rights reserved.

Supplier Site Form - Instructions

CITY OF CHICAGO iSupplier Portal

 Navigator ▼  Favorites ▼

Home Logout Preferences Personalize Page Diagnostics


Home Orders Shipments Admin Finance


Create Invoices | View Invoices | View Payments

Finance: Create Invoices >

Service Site Information Form

Cancel Submit

 Hide

 **TIP SERVICE SITE INFORMATION FORM**

Before completing your invoice, we kindly ask you to complete the Service Site Information Form below.

As part of a citywide effort to promote more equitable opportunities for organizations to contract with the City, the city will be collecting updated information every six (6) months on the following:

- 1) The location in which services are being provided, please indicate all that apply:
 - The services that are provided directly at the Supplier Headquarter location
 - The services are provided at one or some of its offices
 - The services are provided through a subcontracted organization
 - The services are provided by multiple service sites
- 2) How much of the Standard Purchase Order total amount is being distributed to each of these Service sites.
- 3) The size of the sites where services are being provided.

Thank you for collaborating with making city contracting more equitable and accessible.

After you complete the Service Site Information Form, you will be automatically directed to the usual Invoicing page.

Your organizations headquarter address and Size

Supplier Site Form – Headquarter Details

Your organizations headquarter address and Size

Personalize "Your organizations headquarter address and Size"

* PO Number

User Name

TSANDERS@PHALANXGRPSERVICES.ORG

UEI

FEIN

36-

Supplier Name

PHALANX FAMILY SERVICES

Supplier Size

Less than \$1M budget

Supplier Headquarter Address options

Add a New

Add new Headquarter address

Address Line 1	Address Line 2	City	State	Zip Code

Address and Details on all your Organization Sites and/or any Subcontractor who are supplying the services

Personalize "Address and Details on all your Organization Sites and/or any Subcontractor who are supplying the services"

HQ	Delete	Location	SubContractor	Name of Subcontractor	EIN	Address Line1	Address Line2

Add Another Row


Cancel

Submit

Supplier Site Form – Site Details

Address and Details on all your Organization Sites and/or any Subcontractor who are supplying the services

Personalize "Address and Details on all your Organization Sites and/or any Subcontractor who are supplying the services"

Delete	HQ Location	SubContractor	Name of Subcontractor	EIN	Address Line1	Address Line2
	No ▼	Yes ▼	ABC Delegate	36-1122125	123 W	Main St
Add Another Row						

Address Line2	City	State	Zip Code	Subcontractor Size	Service Amount(in dollars)
Main St	Chicago	IL	60644	Less than \$1M budget ▼	50000

Supplier Site Form – Complete and Submit Form

Your organizations headquarter address and Size

[Personalize "Your organizations headquarter address and Size"](#)

* PO Number

User Name TSANDERS@PHALANXGRPSERVICES.ORG

UEI

FEIN

Supplier Name PHALANX FAMILY SERVICES

Supplier Size

Supplier Headquarter Address options

Address and Details on all your Organization Sites and/or any Subcontractor who are supplying the services

[Personalize "Address and Details on all your Organization Sites and/or any Subcontractor who are supplying the services"](#)

	HQ	SubContractor	Name of Subcontractor	EIN	Address Line1	Address Line2
Delete	Location					
	No ▾	Yes ▾	ABC Delegate	36-1122125	123 W	Main St

Add Another Row

Cancel

Submit

System will Redirect User to Complete Certification

CITY OF CHICAGO iSupplier Portal

Home Logout Help Preferences

Navigator Favorites

Home Orders Shipments Admin Finance

Create Invoices View Invoices View Payments

Invoice Actions

Create Invoice With a PO Go

TIP In order to continue, please review and complete the certification below and acknowledge the certification by entering your name, title, and clicking the acknowledgement checkbox.

Search

Note that the search is case insensitive

Supplier **RINCON FAMILY SERVICES**

Invoice Number

Invoice Date From

(example: 14-Jul-2021)

Invoice Status

Go Clear

Release PO Number

Invoice Amount

Invoice Date To

Currency

Invoice Number	Invoice Date	Invoice Currency Code	Invoice Amount	Release PO Number	Status	Withdraw	Cancel	Update	View Attachments
No search conducted.									

I certify that by accessing the City of Chicagos iSupplier system using my assigned responsibilities from an authorized member of the organization, that I am authorized by the organization to submit requests for reimbursement and reports to the City of Chicago. It is expected that all users with access into the iSupplier system maintain unique, individual, and secure passwords to access the iSupplier system. The City is not responsible for any unauthorized access into the system or submission of any requests for reimbursement or reports as a result of the Organization granting access to users.

* Name Latoya Vaughn Test

* Title Deputy Budget Director Test

☒ * Acknowledge

Create Invoice With a PO Go

Enter Invoice Details

CITY OF CHICAGO iSupplier Portal

Home Orders Shipments Admin Finance

Create Invoices View Invoices View Payments

Purchase Orders Details Manage Tax Review and Submit

Confirmation
Attachment Sample File Invoice Form has been added successfully but not committed; it would be committed when you commit the rest of the current transaction.

Create Invoice: Details
* Indicates required field

Supplier

* Supplier Tax Payer ID
* Remit To D (EFT) CHICAGO IL 60612
Address

Invoice

* Invoice Number 97430-19-01
* Invoice Date 18-Jul-2019
Invoice Type Invoice
Currency USD
* Invoice Description 06/01/2019 - 06/30/2019 HS
Date Good/Services Received 30-Jun-2019
* Department Number 50
DEPT OF FAMILY AND SUPPORT SERVICES
* Attachment Attachment List... Add...

Customer

Customer Tax Payer ID
Customer Name CITY OF CHICAGO - GRE
Address 121 NORTH LASALLE STREET Chicago 60602 US

Items

Release PO Number	Line	Shipment	Item Number	Item Description	Supplier Item Number	Ship To	Available Quantity	*Quantity	Unit Price	UOM	Amount
97430	1	1		0005-PERS		050-2515 HOMELESS SERVICES	41341.28	5200	1	USD	5200
97430	2	1		0044-Fringe Benefits		050-2515 HOMELESS SERVICES	7464.83	1200	1	USD	1200
97430	3	1		0801-Indirect		050-2515 HOMELESS SERVICES	4879.66	150	1	USD	150

Cancel Back Step 2 of 4 Next

Create Invoice - (2) Required Attachments

Add Required Supporting Documentation

1. **Invoice Forms**: include Invoice Summary, Invoice Salary Expenditure Only, and Invoice Non-Personnel Expenditure Form (***Excel version only***).
 - a. Enter “Invoice” in the Title section
 - b. Attach Invoice copies
2. **Supporting Documentation “Support”**: e.g., Payroll Register Form, Invoice copy for non-personnel cost, etc.
 - a. Enter “Support” in the Title section
 - b. Attach supporting documentation copies

*Only upload **two** attachments for each invoice. ***NOTE:** Supporting Documentation should be in order of the billed expense.

Create Invoice - Required Information

Remit To: Verify that the remit-to address and bank account detail for your institution is correct. It can be changed by selecting a different “remit to” site.

Invoice Number: This field is identified as a unique number assigned for tracking and billing purposes and applied in the system to avoid duplication of invoices.

a. **Conventional invoice** number consists of four elements: PO number-Release number-Expenditures covered year (2 digits)-Sequential number (2 digits), e.g., 33328-1-19-01.

b. **eProcurement invoice** number omits the PO number and consists of three elements: Release Number-Expenditures covered year-Sequential number, e.g., 45672-19-01.

Invoice Description: Enter the period covered. For example: **08/01/2019 – 08/31/2019.**

*The Invoice description identifies the period covered for when services performed and/or cost incurred for your submitted invoice.

Date Goods/Services Received: This will be the end date of the expenditure covered period in the format DD-MMM-YYYY. We recommend choosing the day from the calendar selector. Example:



Date Good/Services Received 31-Aug-2017

Department Number: You can select the magnifying glass to see a list of department numbers, but common departments are: 21 Department of Housing; 41 Department of Health; 48 Mayor’s Office for People with Disabilities; 50 Family and Support Services; 54 Planning and Development; 57 Chicago Police Department; 70 Business Affairs and Consumer Protection.

Create Invoice Details (Cont.)

➤ Review and Submit Invoice

CITY OF CHICAGO | Supplier Portal

Home Orders **Shipments** Admin Finance
Create Invoices View Invoices View Payments

Purchase Orders Details **Manage Tax** Review and Submit

Create Invoice: Manage Tax

Cancel Save Back Step 3 of 4 Next **Submit**

Supplier

* Supplier: Chicago Test Vendor
Tax Payer ID: 12-4356789
Remit To: A (EFT XXL234)
Address: 123 ADAMS ST, SUITE 99 CHICAGO IL 60603
Remit To Bank Account: XXXXXX6961
Unique Remittance Identifier
Remittance Check Dgt

Invoice

* Invoice Number: 32010-4-17-01R
* Invoice Date: 17-Oct-2017
Invoice Type: Standard
* Currency: USD
Invoice Description: 09/01/17-09/29/17 CC
Date Good/Services Received: 29-Sep-2017
Department Number: 50
Web Disclosure Attachment: [Attachment List...](#)

Customer

* Customer Tax Payer ID: 36-6005820
Customer Name: CITY OF CHICAGO - GRE
Address: 121 NORTH LASALLE STREET Chicago 60602 US

Summary Tax Lines

Calculate

Summary Tax Line Number Tax Regime Code Tax Status Code Tax Jurisdiction Code Tax Rate Code Tax Rate Tax Amount Line Status
No results found.

Items

PO Number	Line	Shipment	Item Description	Supplier Item Number	Ship To	Available Qty	Quant By To Invoice UOM	Unit Price	Amount
32010-4	2	2	0005 PROGRAM PERSONNEL		050-1005 FAMILY AND SUPPORT SERVICES	17994.33	17,994.33 USD	1.00	17,994.33
32010-4	3	3	0044 PROGRAM PRONCES		050-1005 FAMILY AND SUPPORT SERVICES	5170.21	5,170.21 USD	1.00	5,170.21

Shipping and Handling

Charge Type
No results found.

Amount Description

Invoice Summary

Items	23,164.54
Less Retainage	0.00
Freight	0.00
Miscellaneous	0.00
Tax	0.00
Total (USD)	23,164.54

Recalculate Total

Cancel Save Back Step 3 of 4 Next **Submit**

New Electronic Invoice and Tax Certification Language in iSupplier

The below screenshots outline the new certification requirements in iSupplier, which will replace the existing electronic forms that are required with each invoice.

Summary Tax Lines						
Tax Regime Code	Tax	Tax Status Code	Tax Jurisdiction Code	Tax Rate Code	Tax Rate	Tax Amount
No results found.						

Invoice Summary	
Items	500.00
Less Retainage	0.00
Freight	0.00
Miscellaneous	0.00
Tax	0.00
Total (USD)	500.00

By completing and submitting this request "Report", I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise.

The undersigned certifies that:

- (1) He or She is an authorized signatory for the applicant;
- (2) The signatory has read the guidelines of the city of Chicago incorporated herein by reference.
- (3) This reimbursement claim represents payment due for services performed and cost incurred and paid directly by the applicant during the period covered by this requisition;
- (4) The signatory has not previously requested or received reimbursement for the expenditures included in this requisition;
- (5) The original documentation supporting the expenditures included in this requisition is on file and available for audit or review upon request;
- (6) To the best of the signatory's knowledge and belief that the expenditure is true, accurate, and is for the purpose and objective set forth in the terms and conditions of the award;
- (7) This payment is permitted by law, the appropriation amounts were available at the time and are used for intended purposes, the goods and/or services have been received and conform to the requirements of the order of agreement, the required administrative approvals have been obtained, and the quantities, prices, and calculations are accurate;
- (8) The signatory is aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may be subject to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812); and
- (9) This applicant releases the City of Chicago, its employees and agents, with respect to damages to property or material submitted in connection herewith.

* Name * Title ☒ * Acknowledge

I certify that all deposits of withheld taxes and employer-employee Social Security Taxes required to be made with a Federal Tax Depository and required reports have been made in a timely manner. For the period covered, there are no delinquent liabilities for employer's payroll taxes due to the Federal and/or Illinois State governments. I further certify that I have on file complete copies of Forms W-4 and IL-4 for each person who is now or has been paid wages by my organization.

For the period covered, there are no delinquent liabilities for employer's payroll taxes due to the Federal and/or Illinois State governments.

I further certify that I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise.

* Name * Title ☒ * Acknowledge

Step 4 of 4

Editing Invoices

- If Changes are required **Prior to submission**, Users can Select the “Back” button (not the browser button) to edit details or line information
- If changes are required **After submission**, Users must navigate to the “Finance” tab, “Re-certify ”, “ Enter Invoice Number under search” and select “Go”

Remove Lines from Invoice

CITY OF CHICAGO iSupplier Portal

Home | Orders | Shipments | Admin | Finance

Create Invoices | View Invoices | View Payments

Purchase Orders | Details | Manage Tax | Review and Submit

Create Invoice: Details

* Indicates required field

Supplier

* Supplier: Chicago Test Vendor
Tax Payer ID: 12-4356789
* Remit To: A (EFT XX1234)
Address: 123 ADAMS ST. SUITE 99 CHICAGO IL 60603

Invoice

* Invoice Number: 12345-4-17-03R
Invoice Date: 15-Oct-2017
Invoice Type: Invoice
Currency: USD
* Invoice Description: 09/01-17 - 09/29/17 CR
Date Good/Services Received: 29-Sep-2017
* Department Number: 50
DEPT OF FAMILY AND SUPPORT SERVICES
* Attachment: None

Customer

Customer Tax Payer ID: [REDACTED]
Customer Name: CITY OF CHICAGO - GRE
Address: 121 NORTH LASALLE STREET Chicago 60602 US

Items

Release PO Number	Line	Shipment	Item Number	Item Description	Supplier Item Number	Ship To	Available Quantity	Quantity	Unit Price	UOM	Amount
7-4	10	10		0300-PROGRAM-MATERIALS/SUPPLIES		050-2005 FAMILY AND SUPPORT SERVICES	6537	1500	1	USD	1500

To remove a line, select Back and Remove Line from Invoice

Cancel Back Step 2 of 4 Next

Remove Lines from Invoice

CITY OF CHICAGO iSupplier Portal

Home
Orders
Shipments
Admin
Finance

Create Invoices
View Invoices
View Payments

Purchase Orders
Details
Manage Tax
Review and Submit

Create Invoice: Purchase Orders

Cancel
Step 1 of 4
Next

Search

Note that the search is case insensitive

Release PO Number
Release PO Date
(example: 15-Oct-2017)
Go
Clear

Advanced Search

Select Items:
Add to Invoice

Previous
1-10
Next 10

Select All
Select None

Select PO Number	Line	Shipment	Advances or Financing	Item Description	Item Number	Supplier Item Number	Ordered	Received	Invoiced	UOM	Unit Price	Curr	Ship To	Organization	Packing Slip	Waybill
<input type="checkbox"/> 7	1	1	<input type="checkbox"/>	(1-SDOP) 0005-PERSONNEL			37785	0	37785	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	2	2	<input type="checkbox"/>	(1-SDOP) 0044-FRINGE BENEFITS			5058	0	5058	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	8	8	<input type="checkbox"/>	(2-BC) 0005-PERSONNEL			28050	0	28050	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	9	9	<input type="checkbox"/>	(2-BC) 0044-FRINGE BENEFITS			6171	0	6171	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	10	10	<input type="checkbox"/>	(2-BC) 0100-OPERATING AND TECHNICAL			3600	0	3600	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	12	12	<input type="checkbox"/>	(2-BC) 0300-MATERIALS AND SUPPLIES			156.08	0	156.08	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	14	14	<input type="checkbox"/>	(2-BC) 0900-OTHER			1422	0	1422	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	15	15	<input type="checkbox"/>	(3-BP) 0005-PERSONNEL			31932	0	31932	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	16	16	<input type="checkbox"/>	(3-BP) 0044-FRINGE BENEFITS			7025	0	7025	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		
<input type="checkbox"/> 7	17	17	<input type="checkbox"/>	(3-BP) 0100-OPERATING AND TECHNICAL			2898	0	2898	USD	1	USD	052-2505 CHL YTH SRV	CITY OF CHICAGO - GRE		

Select Items:
Add to Invoice

Previous
1-10
Next 10

Purchase Order Items Added to Invoice

Select Items:
Remove from Invoice

Select All
Select None

Select PO Number	Line	Shipment	Item Description	Item Number	Supplier Item Number	Ordered	Received	Invoiced	UOM	Unit Price	Curr	Ship To	Organization
<input type="checkbox"/> 7	4	10	0300-PROGRAM-MATERIALS/SUPPLIES			11537	0	5000	USD	1	USD	050-2005 FAMILY AND SUPPORT SERVICES	CITY OF CHICAGO - GRE

Cancel
Step 1 of 4
Next

Cancel Invoice

- Search for All Invoices, Under **Finance** tab, Select “**GO**”
- **Cancelling an Invoice will release the funds reserved in the voucher**

CITY OF CHICAGO iSupplier Portal

Home Orders Shipments Admin **Finance** Navigator Favorites Home Logout Preferences Help

Create Invoices View Invoices View Payments

Invoice Actions

Create Invoice With a PO Go

Search

Note that the search is case insensitive

Supplier **Chicago Test Vendor**

Invoice Number

Invoice Date From (example: 16-Oct-2017)

Invoice Status

Go Clear

Release PO Number

Invoice Amount

Invoice Date To

Currency

Invoice Number	Invoice Date	Invoice Currency Code	Invoice Amount	Release PO Number	Status	Withdraw	Cancel	Update	View Attachments
No search conducted.									

Create Invoice With a PO Go

Cancel or Edit Invoice (Cont.)

- Invoice History will appear; Select the Invoice to Edit or Cancel

CITY OF CHICAGO iSupplier Portal

Home Navigator Favorites Home Logout Preferences Help

Home Orders Shipments Admin Finance

Create Invoices View Invoices View Payments

Invoice Actions

Create Invoice With a PO Go

Search

Note that the search is case insensitive

Supplier **Chicago Test Vendor**

Invoice Number

Invoice Date From (example: 16-Oct-2017)

Invoice Status

Go Clear

Release PO Number

Invoice Amount

Invoice Date To

Currency

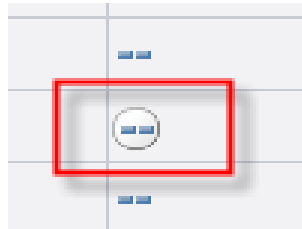
Previous 1-10 Next 10

Invoice Number	Invoice Date	Invoice Currency Code	Invoice Amount	Release PO Number	Status	Withdraw	Cancel	Update	View Attachments
32010-4-17-155	31-Aug-2017	USD	16,755.00	32010-4	In Process				
32010-1-17-01	11-Oct-2017	USD	300.00	32010-4	In Process				
32010-4-17-1999	25-Sep-2017	USD	10,000.00	32010-4	In Process				
32010-4-17-01R3	29-Sep-2017	USD	1,600.00	32010-4	In Process				
32010-4-17-01R4	29-Sep-2017	USD	200.00	32010-4	In Process				
32010-4-17-1122233	06-Oct-2017	USD	1,700.00	32010-4	In Process				
32010-1-17-19	06-Oct-2017	USD	100.00	32010-4	Unsubmitted				
32010-4-17-40	31-Aug-2017	USD	2.00	32010-4	In Process				
8yr3oihf	06-Oct-2017	USD	0.00	32010-4	Cancelled				
32010-4-001	31-Aug-2017	USD	1.00	32010-4	In Process				

Previous 1-10 Next 10

Cancel or Edit Invoice (Cont.)

Cancel Icon



CITY OF CHICAGO iSupplier Portal

Home Orders Shipments Admin **Finance** Navigator Favorites Home Logout Preferences Help

Create Invoices View Invoices View Payments

Invoice Actions

Create Invoice With a PO Go

Search

Note that the search is case insensitive

Supplier **Chicago Test Vendor**

Invoice Number

Invoice Date From (example: 16-Oct-2017)

Invoice Status

Go Clear

Release PO Number

Invoice Amount

Invoice Date To

Currency

Invoice Number	Invoice Date	Invoice Currency Code	Invoice Amount	Release PO Number	Status	Withdraw	Cancel	Update	View Attachments
32010-4-17-155	31-Aug-2017	USD	16,755.00	32010-4	In Process				
32010-1-17-01	11-Oct-2017	USD	300.00	32010-4	In Process				
32010-4-17-1999	25-Sep-2017	USD	10,000.00	32010-4	In Process				
32010-4-17-01R3	29-Sep-2017	USD	1,600.00	32010-4	In Process				
32010-4-17-01R4	29-Sep-2017	USD	200.00	32010-4	In Process				
32010-4-17-1122233	06-Oct-2017	USD	1,700.00	32010-4	In Process				
32010-1-17-19	06-Oct-2017	USD	100.00	32010-4	Unsubmitted				
32010-4-17-40	31-Aug-2017	USD	2.00	32010-4	In Process				
8yr3oihf	06-Oct-2017	USD	0.00	32010-4	Cancelled				
32010-4-001	31-Aug-2017	USD	1.00	32010-4	In Process				

Previous 1-10 Next 10

Post Invoice Submission

Delegate Agencies have an obligation to regularly check the invoice status and take an appropriate action accordingly.

Post Invoice Submission (cont'd)

A. Rejection

1. Under the following circumstances, an Invoice may be Rejected:
 - a. Incorrect Payment Site selected
 - b. Incorrect Date Goods/Services Received
 - c. Incorrect Release matched
 - d. The expenditures covered in the two-year period
 - e. Other
2. Delegate Agencies have an obligation to follow up with the Rejection Notification and take an appropriate action to fix the root cause for Rejection accordingly.

The communication email regarding rejected invoices will originate **From: Workflow Mailer** and may appear in spam folder.
3. When delegate agency resubmits the rejected invoice, the original invoice number should be used and followed by a suffix “**RJ**”. For example, **45672-17-01RJ**.

4. When the delegate agency resubmits invoices to recover previously deleted cost (only submit if **expense** is allowable), please include the suffix “**R**” followed by the invoice number. For Example, 45672-17-01R.

5. Please use “**A**” for invoices that have amendment cost **ONLY** meaning you submitted your original invoice and forgot to include cost pertaining to the exact same period covered, same invoice number, same voucher – only adding on cost related to original invoice. For example, 45672-17-01A.

i.e., Original Invoice 45672-17-01 period covered 04/01/18 – 04/30/18
Amendment Invoice 45672-17-01A period covered 04/01/18 – 04/30/18

6. * If you experience where your agency uses the same PO number, for multiple programs within your organization – your agency can use the following format to submit your invoices : ***this is case by case basis and should be approved by your department contact liaison.***

45672-17-01a

45672-17-01b

45672-17-01c

45672-17-01d

Helpful Tips and Lessons Learned

1. Avoid Back/Forth Browser Buttons
2. Enable Pop-Ups and Check Internet Security Settings
3. Check Email Spam/Junk Mailbox for City of Chicago Mailer notifications
4. Check Attachment Submissions Prior to Submitting
5. Online Discussion Sent to Buyer Only
6. Save Draft Often
7. Check Attachment Submissions Prior to Submitting RFP
8. Click Validate Prior to Submission - To Identify Missing Requirement
9. Prior to Submitting – Enter Name First THEN Click Certify
10. Updating Agency Information and User Access – Remember to Enter Email Address Before Granting Access to Organizational Users .
Assign Proper Responsibilities (Online bidding and/or Invoicing)

Who to Contact for Assistance

iSupplier Technical Assistance Helpline:

CustomerSupport@cityofchicago.org or **(312)744-4357**

Registration Assistance Only:

CustomerSupport@cityofchicago.org or **(312)744-4357**

To receive remittance when payments are made, send your supplier number to:

electronicenrollment@cityofchicago.org

Useful Links

Vendor/Delegate Agency Registration:

<https://www.cityofchicago.org/city/en/depts/dps/isupplier/vendor-registration.html>

City of Chicago Search Online:

<http://webapps.cityofchicago.org/VCSearchWeb/org/cityofchicago/vcsearch/controller/agencySelection/begin.do>

Funding Opportunities:

<https://www.cityofchicago.org/city/en/depts/dps/isupplier/current-bids.html>