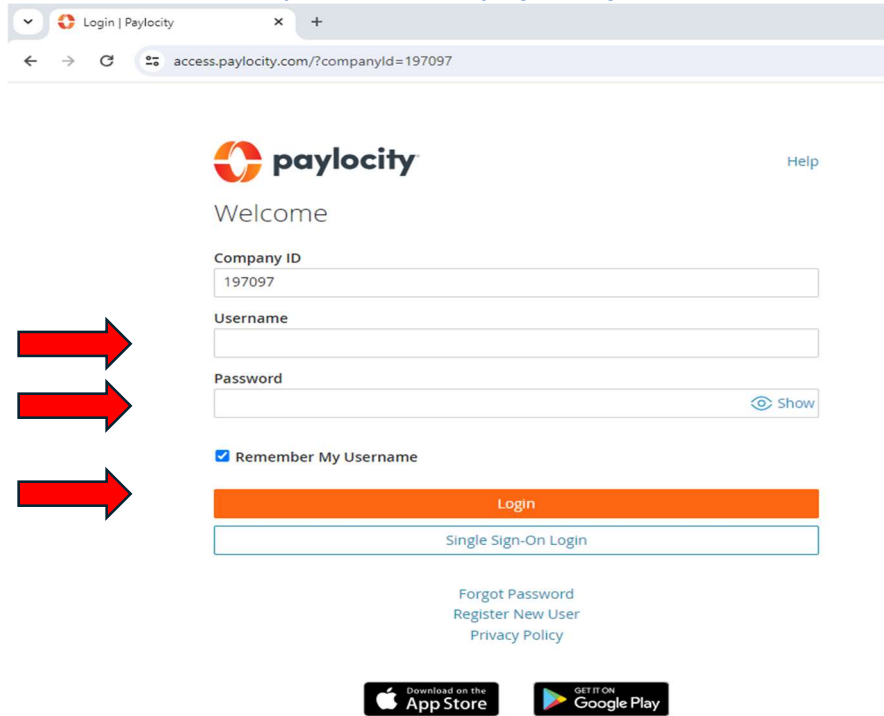


Submitting an Expense Reimbursement Request in Paylocity

Log into Paylocity (<https://access.paylocity.com>):



The screenshot shows the Paylocity login page. Three red arrows point to the 'Company ID', 'Username', and 'Password' fields. The 'Remember My Username' checkbox is checked. Below the login fields are buttons for 'Login' and 'Single Sign-On Login'. At the bottom, there are links for 'Forgot Password', 'Register New User', and 'Privacy Policy', along with 'Download on the App Store' and 'GET IT ON Google Play' buttons.

paylocity

Welcome

Company ID
197097

Username

Password [Show](#)

☒ Remember My Username

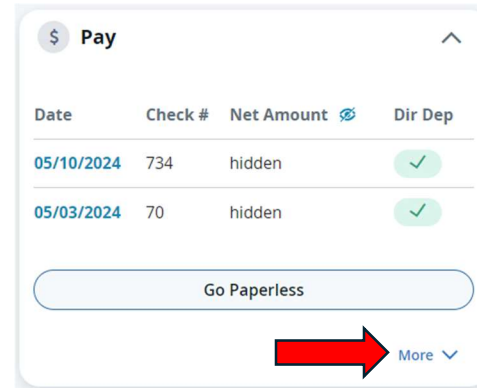
Login

Single Sign-On Login

[Forgot Password](#)
[Register New User](#)
[Privacy Policy](#)

Download on the App Store GET IT ON Google Play

Go to the "Pay" section
Click the "More" arrow:



The screenshot shows the 'Pay' section of the Paylocity interface. It includes a table with columns for Date, Check #, Net Amount, and Dir Dep. Below the table is a 'Go Paperless' button and a 'More' arrow, which is highlighted with a red arrow.

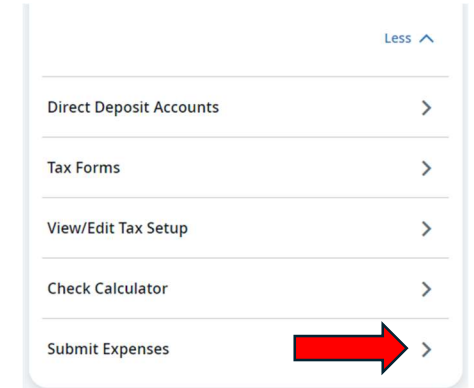
\$ Pay

Date	Check #	Net Amount	Dir Dep
05/10/2024	734	hidden	✓
05/03/2024	70	hidden	✓

Go Paperless

More

Click the "Submit Expenses" arrow:

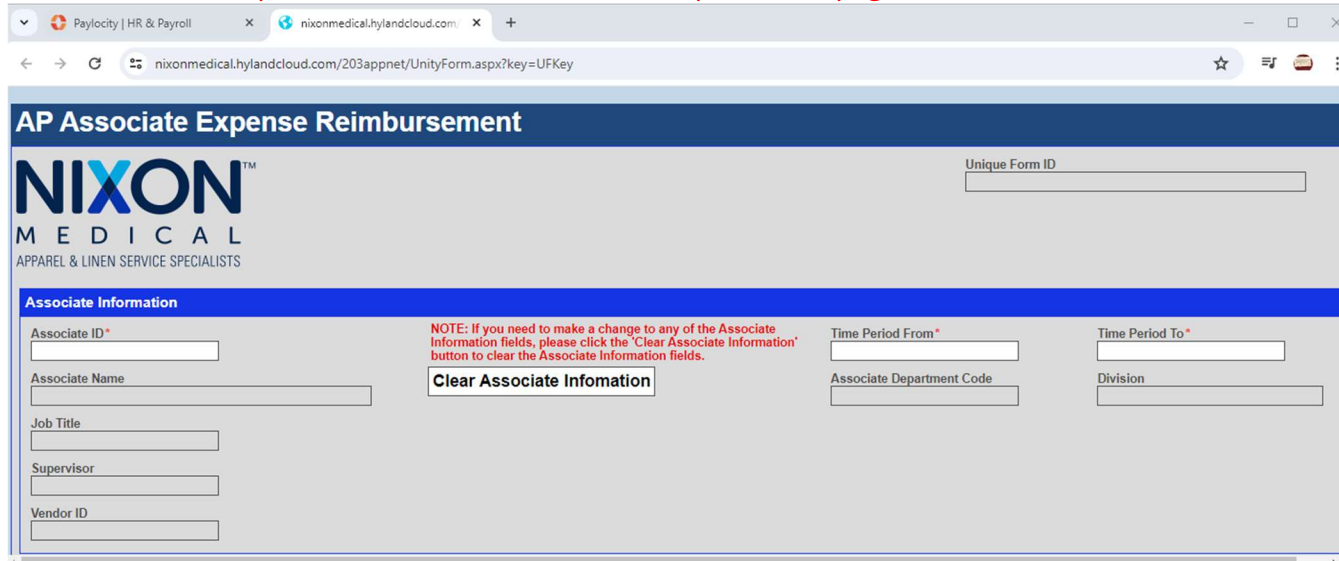


The screenshot shows the navigation menu of the Paylocity interface. The 'Submit Expenses' option is highlighted with a red arrow.

Less

- Direct Deposit Accounts
- Tax Forms
- View/Edit Tax Setup
- Check Calculator
- Submit Expenses

The AP Associate Expense Reimbursement form in a separate webpage window:



The screenshot shows the 'AP Associate Expense Reimbursement' form in a separate webpage window. The form includes fields for Associate ID, Associate Name, Job Title, Supervisor, Vendor ID, Time Period From, Time Period To, Associate Department Code, and Division. A 'Clear Associate Information' button is also present. A note states: 'NOTE: If you need to make a change to any of the Associate Information fields, please click the "Clear Associate Information" button to clear the Associate Information fields.'

AP Associate Expense Reimbursement

NIXON MEDICAL
APPAREL & LINEN SERVICE SPECIALISTS

Unique Form ID

Associate Information

Associate ID*

Associate Name

Job Title

Supervisor

Vendor ID

NOTE: If you need to make a change to any of the Associate Information fields, please click the "Clear Associate Information" button to clear the Associate Information fields.

Clear Associate Information

Time Period From*

Time Period To*

Associate Department Code

Division



Receipts must be attached for each expense before submitting form.