

Michigan Department of Education
Office of Financial Management

Cash Management System (CMS)
Security Access for Requesting Grant Funds and
Reporting Final Expenditures

Recipient Code: _____

Recipient Name: _____

Step 1. Name of the designated individual who is authorized to use the MDE Cash Management System to draw funds, report expenditure data, and assign internal security.

_____ Name (type or print)	_____ Title
_____ Email address	_____ Phone number

Step 2. Access the Internet and go to the following URL: www.michigan.gov/meis

Step 3. If you have an existing MEIS account, click on the USER MANAGEMENT link. Log in and verify that your account is still valid. If yes, skip to Step 5.

Step 4. If you have no account, click on the USER MANAGEMENT link. You will be instructed on how to create an account.

Step 5. Please enter your current or newly established MEIS account information below:

Designee's MEIS Account: _____

Step 6. For the designated individual (Recipient Certify Security):

I agree to protect my user identification and password from unauthorized use. I understand all access under my user ID is my responsibility. I further understand that by reporting expenditure data and requesting funds via the Internet, I am certifying that the expended amounts are correct and properly charged to the projects listed. All information I obtain from the grants system shall be used only in the proper conduct of my organization's business.

New Designee Replacement Designee

_____ Signature of Designee	_____ Person being replaced
_____ Signature of Designee	_____ MEIS number of person being replaced

Step 7. For the Superintendent or Chief Operating Officer:

I attest that the above named individual is authorized to submit grant expenditure information and cash requests to the MDE and to assign security privileges to other individuals within this organization.

Name of Organization

Signature of Superintendent _____
Date

For Public School Academies, this signature needs to be the school board president
For non-school organizations, this signature needs to be the chief operating officer

Type/Print name _____
Title

Step 8. Email, fax, or mail this form to:

CMS-Help Line
Office of Financial Management
P.O. Box 30106, Lansing, Michigan 48909
Fax #: (517) 241-0196 Phone: (517) 335-0534
E-mail: MDE-CMS@michigan.gov