



# **OHIO MEDICAL MARIJUANA CONTROL PROGRAM**

eLicensing Self-Service Portal User Manual – Employee Management



# Ohio Department of Commerce Medical Marijuana Control Program



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## Ohio Department of Commerce Medical Marijuana Control Program



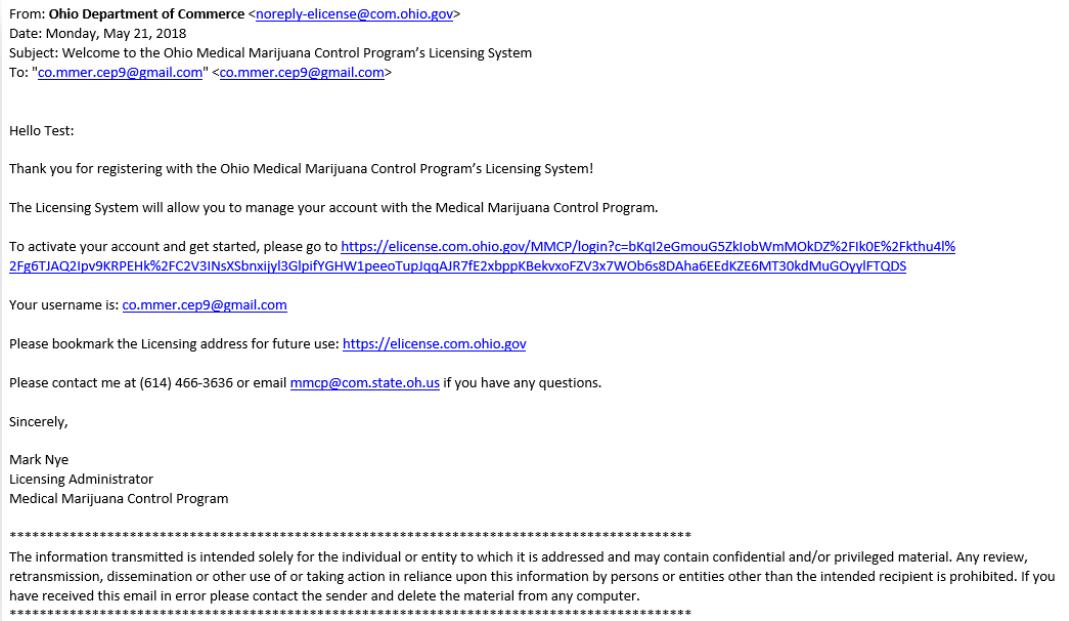
### Introduction

This section of the user manual contains the essential information for the user to make full use of the eLicensing self-service portal employee management module. This manual includes a step-by-step walkthrough for system access and use, as well as a true depiction of the user experience based on the current state of the system. Future iterations of this document will be provided to all licensees and posted on the Medical Marijuana Control Programs website.

### Getting Started with eLicensing

The eLicensing self-service portal is a tool that is used to manage a license, manage employees, and submit payments to the Ohio Department of Commerce Medical Marijuana Control Program for licensees who have been awarded a license to cultivate, process, or conduct testing for the Medical Marijuana community in Ohio. In order to begin using the eLicensing self-service portal as a licensee, the account holder will need to contact the Medical Marijuana Control Program to set up all current and future users for the business, as well as identify what privileges those users may have. The user access request form should be provided to the Medical Marijuana Control Program to establish and manage those users who will either need or no longer need access to the business account information through the eLicensing self-service portal. The user access request form should be submitted to [mmcp@com.state.oh.us](mailto:mmcp@com.state.oh.us) with a subject line including the business name and the phrase 'user access request'.

Once a user has been established by the department, an email will be sent to the users email address with instructions on how to proceed. An example of that email is included below for reference.



Upon selecting the hyperlink to activate the account, the user will be prompted to create a password for their account. To ensure the user account is secure, the new password will need to meet the minimum qualifications of 10 characters made



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up of at least 1 letter, 1 number, and 1 special character. If the entered password does not meet the minimum qualifications, the system will prompt the user to re-enter a qualifying password until one is established.

Please note that each user may be prompted to reset their password periodically due to the standard system security policies.

After a qualifying password has been established, the user will be directed to the eLicensing self-service portal home screen where the user will have the ability to manage active facility licenses, employee licenses, and pay any outstanding fees to the Medical Marijuana Control Program.



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### Logging in to the Portal

To log in to the eLicensing self-service portal, a user must enter the username and password established at registration. The eLicensing self-service portal can be found at the following URL: <https://elicense.com.ohio.gov/s/customlogin>.

The user will be directed to the following login page:

Please Login

- Medical Marijuana Control Program Online services offered by the Department of Commerce require login for security reasons.
- If you are an existing user, please enter your user name and password to Log in. Username is your email address.

New Users

- If you are a new user, Please Click [Create Account now](#).

Search

CREATE ACCOUNT LICENSE SEARCH FILE A COMPLAINT LOGIN

Ohio.gov | Department of Commerce

Medical Marijuana Control Program

Login

Forgot your password?

If an invalid username and password combination is entered, the user will be prompted to check the entry to ensure that the username and password are entered correctly. The user will have the opportunity to try to login up to 5 times. If the user is unable to successfully login after 5 attempts, the user will be locked out for a period of 15 minutes.

Please check your username and password. If you still can't log in, contact your MMCP Customer Community administrator.

Username

commercep9@gmail.com

Password

.....

Log In

Remember me

Forgot Your Password?

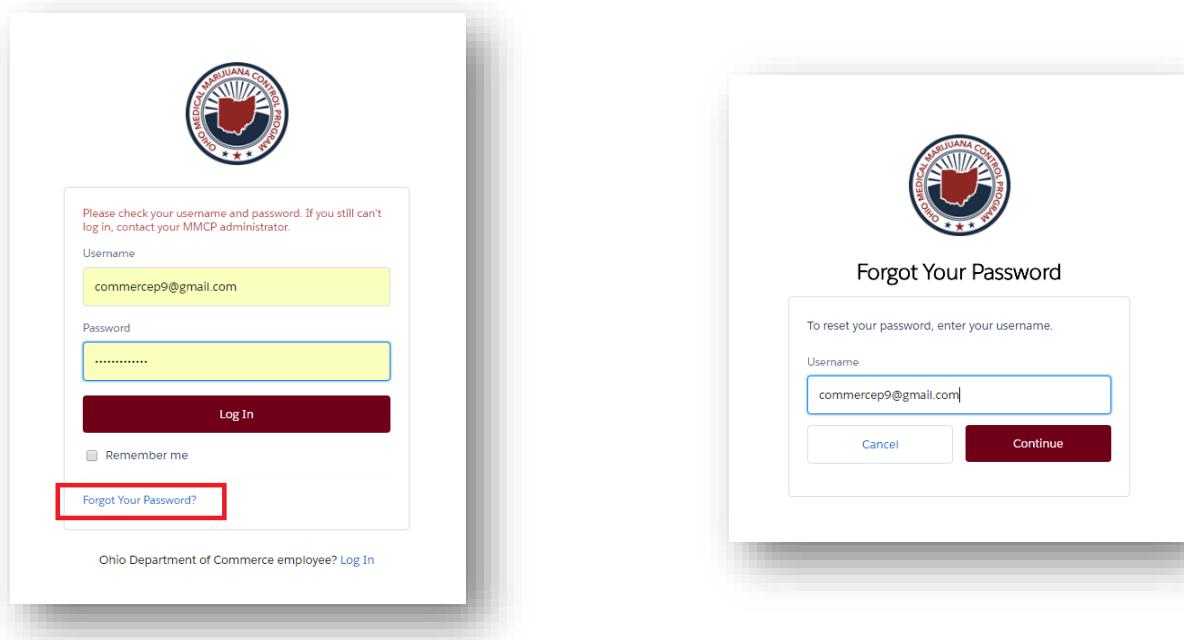
Ohio Department of Commerce employee? Log In



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If the user selects the **Forgot Your Password?** link, the user will be directed to another page where the user will be prompted to enter a username.



Please check your username and password. If you still can't log in, contact your MMCP administrator.

Username: commercep9@gmail.com

Password: .....  
.....

Log In

Remember me

[Forgot Your Password?](#)

Ohio Department of Commerce employee? [Log In](#)

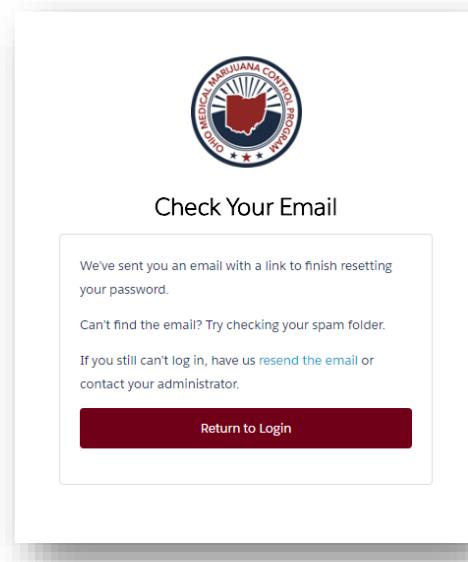
**Forgot Your Password**

To reset your password, enter your username.

Username: commercep9@gmail.com

[Cancel](#) [Continue](#)

Upon selecting the Continue button, an email will be sent to the entered username with instructions on how to reset the associated account password. If the user has had 5 incorrect attempts to login and selects the **Forgot Your Password?** link, the user will receive an email stating that the user will be unable to login until the 15 lock-out period has expired.



**Check Your Email**

We've sent you an email with a link to finish resetting your password.

Can't find the email? Try checking your spam folder.

If you still can't log in, have us [resend the email](#) or contact your administrator.

[Return to Login](#)



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Upon successfully logging into the eLicensing self-service portal, the user will be directed to the account **HOME** page where the user will have access to manage active facility licenses, employee licenses, and pay any outstanding fees to the Medical Marijuana Control Program.

The screenshot shows the homepage of the eLicensing portal. At the top, there is a navigation bar with links for Home, Licenses, Manage Employees, and Manage Payments. On the right side of the top bar are search and test account buttons. Below the navigation bar, there are two main sections: 'Calendar' and 'My Tasks'. The 'Calendar' section displays a monthly calendar for May 2018, showing the days of the week and specific dates. The 'My Tasks' section shows a list of tasks with a 'New' button and an 'Overdue' dropdown menu. At the bottom of the page, there is a red footer bar with links to Commerce Home, Press Room, Privacy Statement, Public Records, Disclaimer, and Employment. The footer also includes a copyright notice: 'Copyright © Medical Marijuana Control Program - A Division of The Ohio Department of Commerce. All Rights Reserved.'



# Ohio Department of Commerce Medical Marijuana Control Program



## Navigating the eLicensing Self-Service Portal

The **HOME** page of the eLicensing self-service portal serves multiple purposes. The user will have the ability to create and manage events associated to the business, as well as create and manage tasks for the business account.

The user will also have the ability to search topics from within the portal. This feature is integrated with the [search.ohio.gov](https://search.ohio.gov) search engine which will display results related to the various government agencies found within the Ohio Department of Commerce.

In addition, the user will have access to quick links to various resources found within the Ohio Department of Commerce such as the privacy statement, disclaimer, public records requests, and employment opportunities.



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The eLicensing self-service portal features 3 interconnected modules; the **Licenses** Module, the **Manage Employees** Module, and the **Manage Payments** Module. These modules can be accessed by selecting one of the tabs located in the upper left portion of the eLicensing self-service portal.

The screenshot shows the Ohio.gov eLicensing self-service portal. The top navigation bar includes links for Home, Licenses, Manage Employees, and Manage Payments. The 'Licenses' link is highlighted with a red box. Below the navigation is a 'Calendar' section showing the month of May 2018 with no events scheduled. Under 'My Tasks', it also indicates no open tasks. A search bar and a 'Test Account' button are visible in the top right.

The **Licenses** Module features a display where the user can view high level information of all inactive and active facility licenses that have been awarded to the associated business.

The screenshot shows the Ohio.gov eLicensing self-service portal with the 'Licenses' module selected, indicated by a red box around the 'Licenses' tab in the top navigation bar. The main content area displays a calendar for May 2018 with the message 'You have no events scheduled for the next 7 days.' A red box highlights the 'Licenses' tab.

The user will see the issued license number, the type of license, the classification of the license, the status of the license, and the license start and expiration dates. The detailed view of each facility license has been addressed on page 13 of this manual.

The screenshot shows the detailed view of a facility license. The top navigation bar shows the 'Licenses' module selected. The main content area displays a table with the following data:

Action	License	Licensee Type	License Classification	Licensee Status	Start Date	Expiration Date	Application Type
view	MMCP00001	Cultivator Level I	Certificate of Operation	Active	5/12/2018	5/11/2019	

General Instructions at the bottom of the table:

- To look into the details of the License, Apply for New Employee Licenses and put in a request for change, Click on View button.



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The **Manage Employees** Module features a display where the user can view high level information of all inactive and active employee licenses that have been awarded to the associated employees of the business.

The user will see the issued facility license number, the issued employee license, the employees first and last name, the assigned employee type, the status of the employee license, and the license start and expiration dates. The detailed view of each employee license has been addressed on page 26 of this manual.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START DATE	EXPIRATION DATE
view	MMCP00001	MMCPE00004	Employee Five	Test	Type 1	Inactive	5/18/2018	5/18/2018
view	MMCP00001	MMCPE00003	Employee Four	Test	Type 2	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE00002	Employee Three	Test	Type 1 Key	Inactive	5/11/2018	5/11/2018
view	MMCP00001	MMCPE00001	Employee Two	Test	Type 1 Key	Active	5/11/2018	5/10/2020

The **Manage Payments** Module features a display where the user can view high level information of all outstanding fees, receipts of previous payments, and previously paid invoices associated to the business account for all facility licenses.



# Ohio Department of Commerce Medical Marijuana Control Program



The screenshot shows the Ohio.gov website for the Medical Marijuana Control Program. The top navigation bar includes links for Home, Licenses, Manage Employees, and Manage Payments. The Manage Payments link is highlighted with a red box. Below the navigation is a calendar section showing 'Today 5/18/2018' and a message stating 'You have no events scheduled for the next 7 days.' At the bottom is a 'My Tasks' section with a 'New' button.

The user will see the various details throughout the payments module. This module has been subdivided into three sections. The first section, Outstanding Fees, lists all fees and fines by the invoice number for the associated business account. This section is the starting point for making payments to the Ohio Department of Commerce. The details on how to pay for an outstanding fee or fine has been addressed on page 38 of this manual.

The screenshot shows the 'Manage Payments' module on the Ohio.gov website. The top navigation bar includes Home, Licenses, Manage Employees, and Manage Payments. The Manage Payments link is highlighted with a red box. Below the navigation is a 'Make Payments' button with a shopping cart icon. The main content area is titled 'Outstanding Fees' and displays a table of fees. The table has columns for FEE NAME, LICENSE NUMBER, APPLICATION ID, LICENSE TYPE, FEE TYPE, APPLICATION SUBTYPE, EMPLOYEE NAME, EMPLOYEE LICENSE, FEE, FEE OUTSTANDING, and FEE CREATED. Two rows of data are shown:

FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEE TYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEE	FEE OUTSTANDING	FEE CREATED
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCP00001	\$10.00	\$10.00	5/18/2018
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCP00011	\$100.00	\$100.00	5/18/2018

The next section within the **Manage Payments** module is the Receipts section. This section lists all receipts for any previous payments made by the associated business account. The user will see the receipt number, the amount paid, the payment method used when paying any fee or fine, the transaction number, and the date the receipt was created. The detailed view of each receipt has been addressed on page 64 of this manual.



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I-0000005		\$100.00		5/11/2018	
FEEL NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEEL TYPE	APPLICATION SUBTYPE
New Employee Application Fee	MMCP00001	A0000005	Cultivator	Application Fee	New Employee
<b>Receipts</b>					
Action	Receipt Number	Amount Tendered	Payment Method	Transaction Number	Receipt Created
View	R-000002	\$100.00	Credit Card	3	5/11/2018

The final section within the **Manage Payments** module is the Paid Invoices section. This section lists all invoices that have been paid by the associated business account. The user will see the invoice number, the amount due, and the invoice create date. The user will also be able to see the details of the invoice which include the fee name, facility license number, application ID, facility license type, fee type, application subtype, employee name (if applicable), employee license number (if applicable), fee amount, fee outstanding, and the date the fee was created. The detailed view of each invoice has been addressed on page 62 of this manual.

<b>Paid Invoices</b>											
Action	INVOICE NUMBER		AMOUNT DUE				INVOICE CREATED				
View	I-0000004		\$0.00				5/11/2018				
FEEL NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEEL TYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEEL	FEEL OUTSTANDING	FEEL	FEEL CREATED
New Employee Application Fee	MMCP00001	A0000003	Cultivator	Application Fee	New Employee	Test Employee Three	MMCPE00002	\$100.00	\$0.00		5/11/2018
View	I-0000003		\$0.00				5/11/2018				
FEEL NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEEL TYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEEL	FEEL OUTSTANDING	FEEL	FEEL CREATED
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$0.00		5/11/2018
View	I-0000002		\$0.00				5/11/2018				
FEEL NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEEL TYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEEL	FEEL OUTSTANDING	FEEL	FEEL CREATED
New Employee Application Fee	MMCP00001	A0000002	Cultivator	Application Fee	New Employee	Test Employee Two	MMCPE00001	\$100.00	\$0.00		5/11/2018



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### Manage Employees Module

The **Manage Employee** Module is available in order for any business who has active licensed facilities to request the Medical Marijuana Control Program to review and determine whether the proposed employee is eligible to work within the Ohio Medical Marijuana Industry based on rule found in the Ohio Administrative Code Chapter 3796.

In accordance with Ohio Administrative Code Chapter 3796: 5-2-01 (A), employees are defined as 'Every owner, principal officer, board member, employee, administrator, agent, or other person who may significantly influence or control the activities of a cultivator, processor, or testing laboratory.'

Any active licensed facility is required by the Ohio Administrative Code Chapter 3796 to provide the Ohio Medical Marijuana Control Program with a completed employee application, employee sworn statement, verification that a background check has been conducted (reference 3796: 5-2-02 for details), application fee, and any additional information the program may request. Please note that the Ohio Medical Marijuana Control Program will not process any employee applications that has not been completed as defined in Ohio Administrative Code Chapter 3796: 5-2-01 (A).

The Manage Employee Module also provides the user with a means to update employee information, request employee identification cards that may have been lost or misplaced, as well as communicate with the Ohio Medical Marijuana Control Program when an employee is no longer associated to a facility.



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### Adding a New Employee

The eLicensing self-service portal provides any active licensed facility with the ability to add new employees to associate to the business account.

To add a new employee to an active licensed facility, the user should navigate to the **Licenses** Module upon successful login.

ACTION	LICENSE	LICENSEE TYPE	LICENSE CLASSIFICATION	LICENSE STATUS	START DATE	EXPIRATION DATE	APPLICATION TYPE
view	MMCP00001	Cultivator Level I	Certificate of Operation	Active	5/12/2018	5/11/2019	

Once the user has navigated to the **Licenses** Module, select the **View** action for an active facility license.

ACTION	LICENSE	LICENSEE TYPE	LICENSE CLASSIFICATION	LICENSE STATUS	START DATE	EXPIRATION DATE	APPLICATION TYPE
view	MMCP00001	Cultivator Level I	Certificate of Operation	Active	5/12/2018	5/11/2019	

Upon selecting the **View** action for an active facility license, the license detail will display. The user will see all pertinent information associated to the facility license including license details, addresses, applications, employees, employee licenses, fees, and associated license documents.



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Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | **Licenses** | Manage Employees | Manage Payments

Search... | Search

License- MMCPC00001

**General Instructions**

- To Add New Employee Click on Add New Employee Button.
- To request for a change in Location, Plans, Ownership Click on Change Request Button.
- To request for Facility Expansion , Pesticide Approval or Advertisement Approval Click Change Request Button.
- If you have any another question, Contact Us.

Information

License	MMCP00001	Business Name	TEST_ACCOUNT_CULTIVATOR
License Classification	Certificate of Operation	License Issuance Date	05/12/2018
License Type/Sub Type	Cultivator Level I	License Start Date	05/12/2018
License status	Active	License Expiration Date	05/11/2019
Application ID	A00000000	Facility Address	

Change Request | **Add New Employee**

Within the license detail screen, the user will have the ability to Add a New Employee by selecting the **Add New Employee** feature.

License- MMCPC00001

**General Instructions**

- To Add New Employee Click on Add New Employee Button.
- To request for a change in Location, Plans, Ownership Click on Change Request Button.
- To request for Facility Expansion , Pesticide Approval or Advertisement Approval Click Change Request Button.
- If you have any another question, Contact Us.

Information

License	MMCP00001	Business Name	TEST_ACCOUNT_CULTIVATOR
License Classification	Certificate of Operation	License Issuance Date	05/12/2018
License Type/Sub Type	Cultivator Level I	License Start Date	05/12/2018
License status	Active	License Expiration Date	05/11/2019
Application ID	A00000000	Facility Address	

Change Request | **Add New Employee**

Please note that if the facility license is inactive, the **Add New Employee** feature will not be available for selection.

Once the user has selected the **Add New Employee** feature, the user will be directed to the *New Employee Application* screen.



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Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

 New Employee

**General Instructions**

- The Employee Application form consists of four components that must be submitted:
- Business Information: All required information around the facility in which the employee is applying must be completed.
- Employee Information: All required information around the employee must be completed.
- Required Documentation: Electronic copies of the required documentation must be uploaded. Please ensure that you are in possession of the five required documents as you will not be able to save this application and return at a later date.
- Attestation: Must be selected in order to proceed with application submission

**Business Information**

Business Name TEST_ACCOUNT_CULTIVATOR	Business License Number MMCP00001
FEIN Number 12-3456789	

**Employee Information**

First Name * <input type="text" value=""/>	Mobile Phone Number <input type="text"/>
Middle Initial <input type="text"/>	Home Phone Number <input type="text"/>
Last Name * <input type="text"/>	Street 1 * <input type="text"/>
Date Of Birth * <input type="text" value="5/18/2018"/>	Street 2 <input type="text"/>
Employee SSN * <input type="text"/>	City * <input type="text"/>
Comments <input type="text"/>	City 2 <input type="text"/>

The New Employee Application is made up of four components, the **Business Information**, the **Employee Information**, the **Required Documentation** for the employee application, and the **Employee Attestation**.

The **Business Information** component contains the business name, facility license number, and FEIN number of the business account. This component is prepopulated with the facility information that the Ohio Medical Marijuana Control Program has on file for the business.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

 New Employee

**General Instructions**

- The Employee Application form consists of four components that must be submitted:
- Business Information: All required information around the facility in which the employee is applying must be completed.
- Employee Information: All required information around the employee must be completed.
- Required Documentation: Electronic copies of the required documentation must be uploaded. Please ensure that you are in possession of the five required documents as you will not be able to save this application and return at a later date.
- Attestation: Must be selected in order to proceed with application submission

**Business Information**

Business Name TEST_ACCOUNT_CULTIVATOR	Business License Number MMCP00001
FEIN Number 12-3456789	

Please note that if any of the prepopulated business information is incorrect, the user should contact the Ohio Medical Marijuana Control program to update the information accordingly.

The **Employee Information** component contains the identifying information of the employee that is required for the Ohio Medical Marijuana Control Program to process a new employee application. The identifying information encompasses the first name, middle initial, last name, date of birth, social security number, mobile phone number, home phone number,



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street address of the employee, and the email address of the employee. The user is also required to define the employee type of the proposed employee.

Employee Information

First Name *	Mobile Phone Number
<input type="text" value=""/>	<input type="text"/>
Middle Initial	Home Phone Number
<input type="text"/>	<input type="text"/>
Last Name *	Street 1 *
<input type="text"/>	<input type="text"/>
Date Of Birth *	Street 2
<input type="text"/> [ 5/18/2018 ]	<input type="text"/>
Employee SSN *	City *
<input type="text"/>	<input type="text"/>
Employee Type *	State *
<input type="text" value="--None--"/>	<input type="text" value="Ohio"/>
Email *	Zip Code *
<input type="text"/>	<input type="text"/>

In accordance with the Ohio Administrative Code Chapter 3796: 5-2-01 (H), the employee types are defined as:

- Type 1 ‘an owner, administrator, or individual that has control and management over the day-to-day activities that significantly impact the operations of the cultivator, processor, or testing laboratory.’
- Type 1 Key ‘an owner, administrator, or individual that has control and management over the day-to-day activities that significantly impact the operations of the cultivator, processor, or testing laboratory. A key employee shall be responsible for all activities at the facility and will serve as the point of contact for the facility with the department.’
- Type 2 ‘a board member, officer, employee, or agent permitted to enter the production and non-production areas of the facility designated in the facility plans and specifications submitted by a cultivator, processor, or testing laboratory under rule 3796:2-1-02 of the Administrative Code.’

Please note that (1) a facility license may only have 3 Type 1 Key designations. If a proposed employee is designated as a Type 1 Key and the facility license has 3 active Type 1 Key designations, the user will not have the ability to submit the **New Employee Application**. (2) Any employee designated as a Type 2 employee is not permitted to access any areas within the facility that contain the vault, security equipment, or other equipment related to the facility’s surveillance operations.

The **Required Documentation** component contains the documentation that the Ohio Medical Marijuana Control Program will need in order to properly evaluate and process a proposed employee submitted by a facility. The user is required to submit electronic copies of the proposed employee’s driver’s license, social security card, headshot photo, verification of address, and the employee sworn statement. The requirements for each of the required document are defined in Ohio Administrative Code Chapter 3796: 5-2-01 (A).



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## Required Documentation \*

Pursuant to 3796: 5-2-01 (A), the following documentation is required in order for the Ohio Medical Marijuana Control Program to process an employee application. All documentation must be completed in its entirety with all three signatures and uploaded to accompany the employee application for processing.

Driver's License/State Issued Id

No file chosen

Social Security Card

No file chosen

Headshot (Photo Dimensions of 2"x2", 300dpi minimum resolution)

No file chosen

Verification Of Address

No file chosen

Sworn Employee Statement

No file chosen

To upload the required documentation, the user will have the ability to select the **Choose File** feature.

## Required Documentation \*

Pursuant to 3796: 5-2-01 (A), the following documentation is required in order for the Ohio Medical Marijuana Control Program to process an employee application. All documentation must be completed in its entirety with all three signatures and uploaded to accompany the employee application for processing.

Driver's License/State Issued Id

No file chosen

Social Security Card

No file chosen

Headshot (Photo Dimensions of 2"x2", 300dpi minimum resolution)

No file chosen

Verification Of Address

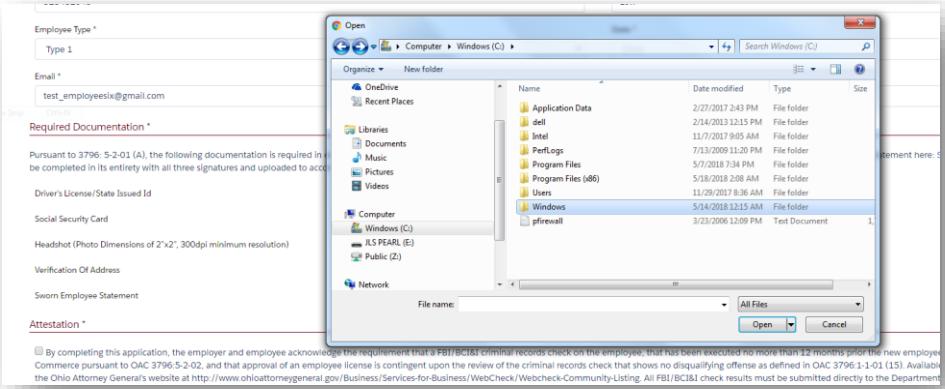
No file chosen

Sworn Employee Statement

No file chosen

## Attestation \*

Upon selecting the **Choose File** feature, the user will be prompted with the file explorer feature available on the user's device.





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Once a file has been selected, the associated file name will be visible within the **Required Documentation** component to the right of the **Choose File** feature.

**Required Documentation \***

Pursuant to 3796: 5-2-01 (A), the following documentation is required in order for the Ohio Medical Marijuana Control Program to process an employee application. Please download the New Employee Sworn Statement here: [SWORN STATEMENT](#) to be completed in its entirety with all three signatures and uploaded to accompany the employee application for processing.

Driver's License/State Issued Id	<input type="button" value="Choose File"/> No file chosen	<a href="#">(View) DL_1.jpg</a> <a href="#">(View) ssn1.jpg</a> <a href="#">(View) pic_3.jpg</a> <a href="#">(View) bill2.jpg</a> <a href="#">(View) Sworn Statement.docx</a>
Social Security Card	<input type="button" value="Choose File"/> No file chosen	
Headshot (Photo Dimensions of 2" x 2", 300dpi minimum resolution)	<input type="button" value="Choose File"/> No file chosen	
Verification Of Address	<input type="button" value="Choose File"/> No file chosen	
Sworn Employee Statement	<input type="button" value="Choose File"/> No file chosen	

Please note that the Employee Sworn Statement is available for download by either selecting the **Sworn Statement Document** hyperlink or by navigating to the following URL:

[https://www.com.ohio.gov/documents/mmcp\\_EmployeeSwornStatement.pdf](https://www.com.ohio.gov/documents/mmcp_EmployeeSwornStatement.pdf).

The **Attestation** component indicates confirmation from the user that both the employer and employee acknowledge the requirement of a background check to be considered for an employee license. The **Attestation** includes directions to the user on where to find a list of available vendors to perform the background check, as well as instructions on where the vendor should direct the completed background check results to ensure delivery to the Ohio Medical Marijuana Control Program. The **Attestation** must be selected in order for the **New Employee Application** to be submitted for review.

**Attestation \***

By completing this application, the employer and employee acknowledge the requirement that a FBI/BCI&I criminal record check be conducted by the Ohio Department of Commerce pursuant to OAC 3796:5-2-02, and that approval of an employee license is contingent upon the review of the criminal history record by the Ohio Attorney General's website at <http://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/WebCheck.aspx>

Once all 4 components of the **New Employee Application** have been completed, the user will have the ability to select the **Submit** feature.

[s/Services-for-Business/WebCheck/Webcheck-Community-Listing. All FBI/BCI&I check results must be submitted to the Ohio Attorney General's website at <http://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/WebCheck.aspx>](#)

[Commerce Home](#) | [Press Room](#) | [Privacy Statement](#) | [Public Records](#) | [Disclaimer](#) | [Employment Opportunities](#)



## Ohio Department of Commerce Medical Marijuana Control Program

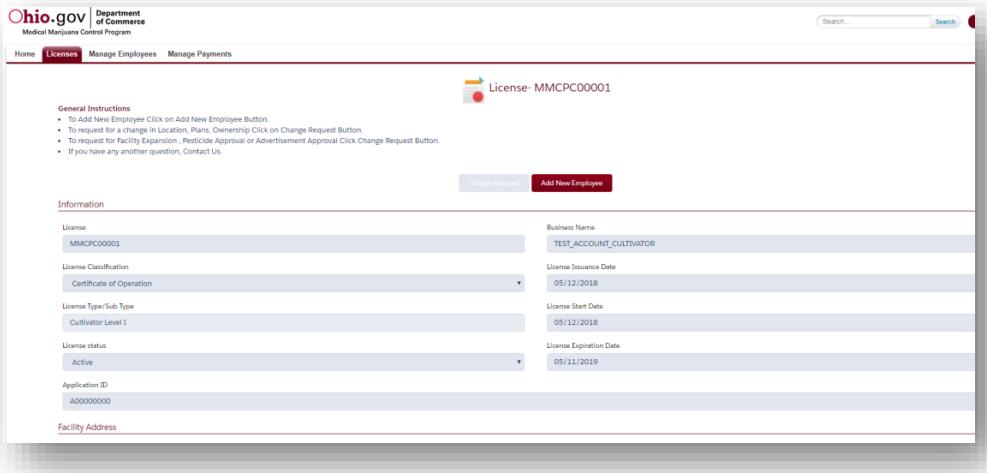


Upon successful submission of the **New Employee Application**, the user will be prompted with a submission successful message.



Please note that once the **New Employee Application** has been submitted, the user will not have the ability to edit the application.

If the user selects the **Exit** feature, the user will be redirected to the facility license detail screen.



The user can verify the successful submission of a **New Employee Application** by navigating to the **Manage Employee** Module.



# Ohio Department of Commerce Medical Marijuana Control Program



Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home Licenses **Manage Employees** Manage Payments

General Instructions

- To Add New Employee Click on Add New Employee Button.
- To request for a change in Location, Plans, Ownership Click on Change Request Button.
- To request for Facility Expansion, Pesticide Approval or Advertisement Approval Click Change Request Button.

License- MMCPC00001

Once in the **Manage Employee** Module, the user can view the pending employee license submission by locating the employee record in the **Employee Licenses** list. The user will see the associated facility license number, the associated employee license number, the last name of the employee, the first name of the employee, the selected employee type associated to the employee record, the employee license status, the employee license start date, and the employee license expiration dates. The detailed view of each employee license has been addressed on page 26 of this manual.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home Licenses **Manage Employees** Manage Payments

**Employee Licenses**

General Instructions

Manage all your Employees from this screen :

- To look into the details of an Employee License Click on View button.
- To request a replacement ID card or cards Click on Request Replacement ID(s).
- To Add New Employee(s) / Apply for Employee License(s) Click on Licenses.

**Request Replacement ID(s)**

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE
view	MMCP00001	MMCPE00004	Employee Five	Test	Type 1	Active
view	MMCP00001	MMCPE00003	Employee Four	Test	Type 1 Key	Active
view	MMCP00001	MMCPE00002	Employee Three	Test	Type 1 Key	Inactive
view	MMCP00001	MMCPE00001	Employee Two	Test	Type 1 Key	Active
view	MMCP00001	MMCPE00000	Employee One	Test	Type 1	Active
view	MMCP00001	MMCPE00011	Employee Six	Test	Type 1	Inactive

Please note that any New Employee Applications will display an Inactive employee license status until the Ohio Medical Marijuana Control Program has processed the application. Also note that the New Employee Application will only be reviewed and processed once the application fee has been paid and the background check has been submitted according to the Ohio Administrative Code Chapter 3796: 5-2-02. The details on how to pay for a New Employee Application fee has been addressed on page 38 of this manual.



## Ohio Department of Commerce Medical Marijuana Control Program



### Updating an Employee

The eLicensing self-service portal provides any active licensed facility with the ability to update employee demographic information associated to an employee who possesses an active employee license with the Ohio Medical Marijuana Control Program.

To update information within the employee demographics, the user should navigate to the **Manage Employees** Module upon successful login.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START DATE	EXPIRATION DATE
view	MMCP00001	MMCPE00004	Employee Five	Test	Type 1	Active	5/18/2018	5/17/2020
view	MMCP00001	MMCPE00003	Employee Four	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE00002	Employee Three	Test	Type 1 Key	Inactive	5/11/2018	5/11/2018
view	MMCP00001	MMCPE00001	Employee Two	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE00000	Employee One	Test	Type 1	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE00011	Employee Six	Test	Type 1	Inactive		

Once the user has navigated to the **Manage Employee** Module, select the **View** action for an active employee license.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS
view	MMCP00001	MMCPE00004	Employee Five	Test	Type 1	Active
view	MMCP00001	MMCPE00003	Employee Four	Test	Type 1 Key	Active
view	MMCP00001	MMCPE00002	Employee Three	Test	Type 1 Key	Inactive

Upon selecting the **View** action for an active employee license, the employee license detail will display. The user will see all pertinent information associated to the employee license details.



# Ohio Department of Commerce Medical Marijuana Control Program



Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Search...

Home | Licenses | **Manage Employees** | Manage Payments

**Employee License- MMCPE00003**

**General Instructions**

- If you want to Change the Employee Type or Inactivate the employee License Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

**Information**

Employee License	MMCPE00003	Employee	EMP 0000003
First Name	Test	Business License	MMCP00001
Middle Initial	H.	License Issuance Date	05/11/2018
Last Name	Employee Four	License Start Date	05/11/2018
Employee License Status	Active	License Expiration Date	05/10/2020
Employee Type	Type 2	<input type="checkbox"/> Please select the checkbox to confirm that the original employee identification card would be returned to the Department of Commerce within fifteen calendar days of the employee's termination or completion of services.	

**Notes And Attachments**

Within the employee license detail, the user can select the **Employee** number hyperlink to open the employee record.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Search...

Home | Licenses | **Manage Employees** | Manage Payments

**Employee License- MMCPE00003**

**General Instructions**

- If you want to Change the Employee Type or Inactivate the employee License Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

**Information**

Employee License	MMCPE00003	Employee	<a href="#">EMP 0000003</a>
First Name	Test	Business License	MMCP00001
Middle Initial	H.	License Issuance Date	05/11/2018

Upon selecting the **Employee** number hyperlink, the user will have the ability to view the employee's personal information such as the employee's first name, last name, address, phone numbers, and email address.



# Ohio Department of Commerce Medical Marijuana Control Program



Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

Employee - EMP 0000003

General Instructions

- If you want to Update the Employee Information, Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

**Edit**

Information	
Employee Number	EMP 0000003
First Name	Test
Middle Initial	H.
Last Name	Employee Four
Date of Birth	11/20/1976
	[ 5/23/2018 ]
Employee Address	
Street 1	1765 Dublinshire St.
City	State
Mobile Phone Number	(789) 023-4456
Home Phone Number	6143893759
Email	tracy@yahoo.com
Application ID	A00000014

Within the employee detail screen, the user will have the ability to modify the employee demographic information by selecting the **Edit** feature.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

Employee - EMP 0000003

General Instructions

- If you want to Update the Employee Information, Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

**Edit**

Information	
Employee Number	EMP 0000003
First Name	Test
Middle Initial	H.
Mobile Phone Number	(789) 023-4456
Home Phone Number	6143893759
Email	tracy@yahoo.com

Once the user has selected the **Edit** feature, the user will be directed to the editable version of the employee detail screen. The critical data elements of the employee record are prepopulated and cannot be modified. The user will have the ability to modify the employee's email address, home address, mobile phone number, home phone number, and 4 of the required documentation items previously submitted during the **New Employee Application** process.



# Ohio Department of Commerce Medical Marijuana Control Program



Please note that if any of the prepopulated employee information is incorrect, the user should contact the Ohio Medical Marijuana Control program to update the information accordingly.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

**Edit Employee**

Employee Number:

First Name:

Middle Initial:

Last Name:

Date Of Birth:  [ 5/23/2018 ]

Email:

Mobile Phone Number:

Home Phone Number:

Street 1:

Street 2:

City:

State:

Zip Code:

Required Documentation:

Please note that if the employee license associated to the employee number selected is inactive, the **Edit** feature will not be available for selection.

Once the user has finished updating the employee demographic details, the user can select the **Submit** feature to complete the update employee process.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

**Edit Employee**

Employee Number:

First Name:

Middle Initial:

Last Name:

Date Of Birth:  [ 5/23/2018 ]

Email:

Mobile Phone Number:

Home Phone Number:

Street 1:

Street 2:

City:

State:

Zip Code:

Required Documentation:

Driver's License/State Issued Id:  No file chosen

Social Security Card:  No file chosen

Headshot (Photo Dimensions of 2"x2", 300dpi minimum resolution):  No file chosen

Verification Of Address:  No file chosen

**Submit** | **Cancel**



# Ohio Department of Commerce Medical Marijuana Control Program



Upon selection of the **Submit** feature, the user will be prompted with a submission successful message.

The screenshot shows a web browser window for the Ohio.gov Medical Marijuana Control Program. The header includes the Ohio.gov logo, the Department of Commerce, and the Medical Marijuana Control Program. The navigation bar has links for Home, Licenses, Manage Employees, and Manage Payments. The main content area displays a red "Submission Successful" message in a box with a close button. The URL in the address bar is <https://www.ohio.gov/commerce/medical-marijuana-control-program/manage-employees>.

If the user selects the **Exit** feature, the user will be redirected to the uneditable version of the employee details screen where any field updates will be displayed.

The screenshot shows a web browser window for the Ohio.gov Medical Marijuana Control Program. The header includes the Ohio.gov logo, the Department of Commerce, and the Medical Marijuana Control Program. The navigation bar has links for Home, Licenses, Manage Employees, and Manage Payments. The main content area shows an employee detail page for "Employee - EMP 0000003". It features a "Edit" button. The page is divided into sections: "Information" (Employee Number: EMP 0000003, First Name: Test, Middle Initial: H, Mobile Phone Number: (789) 023-4456, Home Phone Number: 6143893759, Email: tracy@yahoo.com) and "General Instructions" (two bullet points: "If you want to Update the Employee Information, Click on Edit button." and "If you want to pay dues on this Employee, Click on Manage Payments."). The URL in the address bar is <https://www.ohio.gov/commerce/medical-marijuana-control-program/manage-employees/EMP-0000003>.



## Ohio Department of Commerce Medical Marijuana Control Program



### Updating an Employee License

The eLicensing self-service portal provides any active licensed facility with the ability to update license detail information associated to an employee who possesses an active employee license with the Ohio Medical Marijuana Control Program.

To update information within the employee license, the user should navigate to the **Manage Employees** Module upon successful login.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START DATE	EXPIRATION DATE
view	MMCP00001	MMCPE0004	Employee Five	Test	Type 1	Active	5/18/2018	5/17/2020
view	MMCP00001	MMCPE0003	Employee Four	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE0002	Employee Three	Test	Type 1 Key	Inactive	5/11/2018	5/11/2018
view	MMCP00001	MMCPE0001	Employee Two	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE0000	Employee One	Test	Type 1	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE0011	Employee Six	Test	Type 1	Inactive		

Once the user has navigated to the **Manage Employee** Module, select the **View** action for an active employee license.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS
view	MMCP00001	MMCPE0004	Employee Five	Test	Type 1	Active
view	MMCP00001	MMCPE0003	Employee Four	Test	Type 1 Key	Active
view	MMCP00001	MMCPE0002	Employee Three	Test	Type 1 Key	Inactive

Upon selecting the **View** action for an active employee license, the employee license detail will display. The user will see all pertinent information associated to the employee license details.



# Ohio Department of Commerce Medical Marijuana Control Program



Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home Licenses **Manage Employees** Manage Payments

 Employee License- MMCPE00004

#### General Instructions

- If you want to Change the Employee Type or Inactivate the employee License Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

**Edit**

#### Information

Employee License

MMCPE00004

Employee

EMP 0000004

First Name

Test

Business License

MMCP00001

Middle Initial

N

License Issuance Date

05/18/2018

Last Name

Employee Five

License Start Date

05/18/2018

Employee License Status

Active

License Expiration Date

05/17/2020

Employee Type

Type 1

Within the license detail screen, the user will have the ability to modify the employee license by selecting the **Edit** feature.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home Licenses **Manage Employees** Manage Payments

 Employee License- MMCPE00004

#### General Instructions

- If you want to Change the Employee Type or Inactivate the employee License Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

**Edit**

#### Information

Employee License

MMCPE00004

Employee

EMP 0000004

First Name

Test

Business License

MMCP00001

Please note that if the employee license is inactive, the **Edit** feature will not be available for selection.



## Ohio Department of Commerce Medical Marijuana Control Program



Once the user has selected the **Edit** feature, the user will be directed to the editable version of the employee license screen. The critical data elements of the employee license record are prepopulated and cannot be modified. The user will have the ability modify only the employee type and employee license status of the selected employee license.

Please note that if any of the prepopulated employee license information is incorrect, the user should contact the Ohio Medical Marijuana Control program to update the information accordingly.

Upon selection of the employee license status field, the user will have the ability to update the employee license from active to inactive.

Information

Employee License: MMCPE0004

First Name: Test

Middle Initial: N

Last Name: Employee Five

Employee License Status:

- Active
- Active
- Inactive
- Type 1

Employee: EMP 00000

Business License: MMCPC000

License Issuance Date: 05/18/201

License Start Date: 05/18/201

License Expiration Date: 05/17/202

Please select the checkbox to confirm that the original employee identification card would be returned to the Department of Commerce within fifteen calendar days of the employee's last day of employment.

Please note that if the user updates the employee license status to inactive, the employee license will no longer be valid indicating that the employee is no longer employed with the associated facility. The detailed steps to inactivating an employee license have been addressed on page 30 of this manual.

If the user selects the employee type field, the user will have the ability to modify the employee type designation assigned to the associated employee.

Last Name: Employee Four

Employee License Status: Active

License Start Date: 05/11/2018

License Expiration Date: 05/10/2020

Employee Type:

- Type 1
- Type 1
- Type 1 Key
- Type 2

Notes And Attachments

ACTIONS	TITLE	CREATED DATE	LIST MODIFIED DATE
No records to display			



## Ohio Department of Commerce Medical Marijuana Control Program



In accordance with the Ohio Administrative Code Chapter 3796: 5-2-01 (H), the employee types are defined as:

- Type 1 ‘an owner, administrator, or individual that has control and management over the day-to-day activities that significantly impact the operations of the cultivator, processor, or testing laboratory.’
- Type 1 Key ‘an owner, administrator, or individual that has control and management over the day-to-day activities that significantly impact the operations of the cultivator, processor, or testing laboratory. A key employee shall be responsible for all activities at the facility and will serve as the point of contact for the facility with the department.’
- Type 2 ‘a board member, officer, employee, or agent permitted to enter the production and non-production areas of the facility designated in the facility plans and specifications submitted by a cultivator, processor, or testing laboratory under rule 3796:2-1-02 of the Administrative Code.’

Please note that (1) a facility license may only have 3 Type 1 Key designations. If a proposed employee is designated as a Type 1 Key and the facility license has 3 active Type 1 Key designations, the user will not have the ability to submit the **New Employee Application**. (2) Any employee designated as a Type 2 employee is not permitted to access any areas within the facility that contain the vault, security equipment, or other equipment related to the facility’s surveillance operations.

Once the user has finished updating the employee license, the user can select the **Save** feature to complete the update employee license process.



Upon selection of the **Save** feature, the user will be redirected to the Manage Employees main license screen where the user can validate the update was successful by locating the employee license record in the list.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START DATE	EXPIRATION DATE
view	MMCP00001	MMCP00004	Employee Five	Test	Type 1	Inactive	5/18/2018	5/18/2018
view	MMCP00001	MMCP00003	Employee Four	Test	Type 1 Key	Active	5/11/2018	5/10/2020



# Ohio Department of Commerce Medical Marijuana Control Program



## Inactivating an Employee License

The eLicensing self-service portal provides any active licensed facility with the ability to inactivate an employee license associated to an employee who possesses an active employee license with the Ohio Medical Marijuana Control Program.

To inactivate an employee license, the user should navigate to the **Manage Employees** Module upon successful login.

The screenshot shows the 'Employee Licenses' list page. At the top, there is a navigation bar with links for Home, Licenses, Manage Employees, and Manage Payments. Below the navigation bar, there is a search bar with a 'Search' button. The main content area displays a table of employee licenses. The table has columns for ACTION, BUSINESS LICENSE, EMPLOYEE LICENSE, LAST NAME, FIRST NAME, EMPLOYEE TYPE, EMPLOYEE LICENSE STATUS, START DATE, and EXPIRATION DATE. The data in the table is as follows:

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START DATE	EXPIRATION DATE
view	MMCPC00001	MMCPE00004	Employee Five	Test	Type 1	Active	5/18/2018	5/17/2020
view	MMCPC00001	MMCPE00003	Employee Four	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCPC00001	MMCPE00002	Employee Three	Test	Type 1 Key	Inactive	5/11/2018	5/11/2018
view	MMCPC00001	MMCPE00001	Employee Two	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCPC00001	MMCPE00000	Employee One	Test	Type 1	Active	5/11/2018	5/10/2020
view	MMCPC00001	MMCPE00011	Employee Six	Test	Type 1	Inactive		

At the bottom of the page, there is a footer with links: Commerce Home, Press Room, Privacy Statement, Public Records, Disclaimer, and Employment.

Once the user has navigated to the **Manage Employee** Module, select the **View** action for an active employee license.

The screenshot shows the 'Employee Licenses' list page. The 'view' action for the first employee license (MMCPE00004) is highlighted with a red box. The rest of the table data is the same as the previous screenshot.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START DATE	EXPIRATION DATE
view	MMCPC00001	MMCPE00004	Employee Five	Test	Type 1	Active	5/18/2018	5/17/2020
view	MMCPC00001	MMCPE00003	Employee Four	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCPC00001	MMCPE00002	Employee Three	Test	Type 1 Key	Inactive	5/11/2018	5/11/2018
view	MMCPC00001	MMCPE00001	Employee Two	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCPC00001	MMCPE00000	Employee One	Test	Type 1	Active	5/11/2018	5/10/2020
view	MMCPC00001	MMCPE00011	Employee Six	Test	Type 1	Inactive		

Upon selecting the **View** action for an active employee license, the employee license detail will display. The user will see all pertinent information associated to the employee license details.



# Ohio Department of Commerce Medical Marijuana Control Program



Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

Employee License- MMCPE00004

**General Instructions**

- If you want to Change the Employee Type or Inactivate the employee License Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

**Edit**

**Information**

Employee License	Employee
MMCPE00004	EMP 0000004
First Name	Business License
Test	MMCP00001
Middle Initial	License Issuance Date
N	05/18/2018
Last Name	License Start Date
Employee Five	05/18/2018
Employee License Status	License Expiration Date
Active	05/17/2020
Employee Type	
Type 1	

Within the license detail screen, the user will have the ability to modify the employee license by selecting the **Edit** feature.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

Employee License- MMCPE00004

**General Instructions**

- If you want to Change the Employee Type or Inactivate the employee License Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

**Edit**

**Information**

Employee License	Employee
MMCPE00004	EMP 0000004
First Name	Business License
Test	MMCP00001

Please note that if the employee license is inactive, the **Edit** feature will not be available for selection.



## Ohio Department of Commerce Medical Marijuana Control Program



Once the user has selected the **Edit** feature, the user will be directed to the editable version of the employee license screen. The critical data elements of the employee license record are prepopulated and cannot be modified. The user will have the ability modify only the employee type and employee license status of the selected employee license.

Please note that if any of the prepopulated employee license information is incorrect, the user should contact the Ohio Medical Marijuana Control program to update the information accordingly.

Upon selection of the employee license status field, the user will have the ability to update the employee license from active to inactive.

Information

Employee License: MMCPE00004

First Name: Test

Middle Initial: N

Last Name: Employee Five

Employee License Status:

- Active
- Active
- Inactive

Type 1

Employee: EMP 000000

Business License: MMCPC00001

License Issuance Date: 05/18/2018

License Start Date: 05/18/2018

License Expiration Date: 05/17/2020

Please select the checkbox to confirm that the original employee identification card would be returned to the Department of Commerce within fifteen calendar days of the employee's termination or completion of services.

Please note that if the user updates the employee license status to inactive, the employee license will no longer be valid indicating that the employee is no longer employed with the associated facility.

If the user has selected an inactive employee license status, the user will be required to confirm that the original employee identification card issued to the employee will be returned to the Ohio Department of Commerce within 15 calendar days of the employee's inactivation or completion of services in accordance to the Ohio Administrative Code Chapter 3796: 5-2-01 (F).

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employee** | Manage Payments

Employee License- MMCPE00003

General Instructions

- If you want to Change the Employee Type or Inactivate the employee License Click on Edit button.
- If you want to pay dues on this Employee, Click on Manage Payments.

Information

Employee License: MMCPE00003

First Name: Test

Middle Initial: H.

Last Name: Employee Four

Employee License Status:

- Active
- Type 2

Employee: EMP 000000

Business License: MMCPC00001

License Issuance Date: 05/11/2018

License Start Date: 05/11/2018

License Expiration Date: 05/10/2020

Please select the checkbox to confirm that the original employee identification card would be returned to the Department of Commerce within fifteen calendar days of the employee's termination or completion of services.



## Ohio Department of Commerce Medical Marijuana Control Program



Once the user has finished updating the employee license, the user can select the **Save** feature to complete the inactivate employee license process.



Upon selection of the **Save** feature, the user will be redirected to the Manage Employees main license screen where the user can validate the update was successful by locating the employee license record in the list.

General Instructions  
Manage all your Employees from this screen :  
• To look into the details of an Employee License Click on View button.  
• To request a replacement ID card or cards Click on Request Replacement ID(s).  
• To Add New Employee(s) / Apply for Employee License(s) Click on Licenses.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START DATE	EXPIRATION DATE
view	MMCP00001	MMCPE00004	Employee Five	Test	Type 1	Inactive	5/18/2018	5/18/2018
view	MMCP00001	MMCPE00003	Employee Four	Test	Type 1 Key	Active	5/11/2018	5/10/2020

Please note that once an employee license has been inactivated, the **New Employee Application** process must be completed in order for the employee to work within the facility in the future.



# Ohio Department of Commerce Medical Marijuana Control Program



## Request a Replacement Employee ID Card

The eLicensing self-service portal provides any active licensed facility with the ability to request a replacement identification card for an employee who possesses an active employee license with the Ohio Medical Marijuana Control Program for any circumstances resulting from misplacement or loss of an original identification card.

To request a replacement ID for an employee, the user should navigate to the **Manage Employees** Module upon successful login.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home Licenses Manage Employees Manage Payments

Employee Licenses

**General Instructions**  
Manage all your Employees from this screen :

- To look into the details of an Employee License Click on View button.
- To request a replacement ID card or cards Click on Request Replacement ID(s).
- To Add New Employee(s) / Apply for Employee License(s) Click on Licenses.

**Request Replacement ID(s)**

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START DATE	EXPIRATION DATE
view	MMCP00001	MMCPE00004	Employee Five	Test	Type 1	Active	5/18/2018	5/17/2020
view	MMCP00001	MMCPE00003	Employee Four	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE00002	Employee Three	Test	Type 1 Key	Inactive	5/11/2018	5/11/2018
view	MMCP00001	MMCPE00001	Employee Two	Test	Type 1 Key	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE00000	Employee One	Test	Type 1	Active	5/11/2018	5/10/2020
view	MMCP00001	MMCPE00011	Employee Six	Test	Type 1	Inactive		

Commerce Home | Press Room | Privacy Statement | Public Records | Disclaimer | Employment

Once the user has navigated to the **Manage Employee** Module, select the **Request Replacement ID(s)** feature.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home Licenses Manage Employees Manage Payments

Employee Licenses

**General Instructions**  
Manage all your Employees from this screen :

- To look into the details of an Employee License Click on View button.
- To request a replacement ID card or cards Click on Request Replacement ID(s).
- To Add New Employee(s) / Apply for Employee License(s) Click on Licenses.

**Request Replacement ID(s)**

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE
view	MMCP00001	MMCPE00004	Employee Five	Test	Type 1
view	MMCP00001	MMCPE00003	Employee Four	Test	Type 1 Key



## Ohio Department of Commerce Medical Marijuana Control Program



Upon selection of the **Request Replacement ID(s)** feature, the user will be directed to a list view containing employee license records for all associated employees who possess an active employee license with the Ohio Medical Marijuana Control Program.

EMPLOYEE LICENSE	EMPLOYEE FIRST NAME	EMPLOYEE LAST NAME
MMCPE00000	Test	Employee One
MMCPE00004	Test	Employee Five
MMCPE00001	Test	Employee Two
MMCPE00003	Test	Employee Four

Within the **Request Replacement ID(s)** feature, the user can select either one or many employee licenses to request replacement ids by selecting the checkbox adjacent to the employee license number.

EMPLOYEE LICENSE	EMPLOYEE FIRST NAME	EMPLOYEE LAST NAME
MMCPE00000	Test	Employee One
MMCPE00001	Test	Employee Two
MMCPE00003	Test	Employee Four

Once the user has selected one or many employee licenses, the user can select the **Next** feature to continue with the replacement id request.



# Ohio Department of Commerce Medical Marijuana Control Program



Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

Request Replacement ID(s)

EMPLOYEE LICENSE	EMPLOYEE FIRST NAME	EMPLOYEE LAST NAME
<input type="checkbox"/> MMCPE00000	Test	Employee One
<input type="checkbox"/> MMCPE00001	Test	Employee Two
<input type="checkbox"/> MMCPE00003	Test	Employee Four

Upon selecting the **Next** feature, the user will be directed to a new list view containing all the employee licenses selected within the **Request Replacement ID(s)** screen. Within the list view, the user will see the employee license number, the employee first name, the employee last name, and a reason for replacement field to enter why a replacement id is being requested for the employee license selected.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

Request Replacement ID(s)

EMPLOYEE LICENSE	EMPLOYEE FIRST NAME	EMPLOYEE LAST NAME	REASON FOR REPLACEMENT *
<input checked="" type="checkbox"/> MMCPE00001	Test	Employee Two	<input type="text" value="Employee lost card..."/>

Once the user has entered a reason for replacement for each employee license select, the user can select the **Save** feature to complete the **Request Replacement ID** process.

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | **Manage Employees** | Manage Payments

Request Replacement ID(s)

EMPLOYEE LICENSE	EMPLOYEE FIRST NAME	EMPLOYEE LAST NAME	REASON FOR REPLACEMENT *
<input checked="" type="checkbox"/> MMCPE00000	Test	Employee One	<input type="text"/>



## Ohio Department of Commerce Medical Marijuana Control Program



Upon selection of the **Save** feature, the user will be redirected to the **Manage Employees** main license screen where the user can validate the update was successful by locating the employee license record in the list.

ACTION	BUSINESS LICENSE	EMPLOYEE LICENSE	LAST NAME	FIRST NAME	EMPLOYEE TYPE	EMPLOYEE LICENSE STATUS	START
view	MMCP00001	MMCPE0004	Employee Five	Test	Type 1	Active	5/18/
view	MMCP00001	MMCPE0003	Employee Four	Test	Type 1 Key	Active	5/11/
view	MMCP00001	MMCPE0002	Employee Three	Test	Type 1 Key	Inactive	5/11/
view	MMCP00001	MMCPE0001	Employee Two	Test	Type 1 Key	Active	5/11/
view	MMCP00001	MMCPE0000	Employee One	Test	Type 1	Active	5/11/
view	MMCP00001	MMCPE0011	Employee Six	Test	Type 1	Inactive	

Please note that the replacement id request will only be reviewed and processed once the replacement id fee has been paid by the business. The details on how to pay for a replacement identification card fee has been addressed on page 38 of this manual.



## Ohio Department of Commerce Medical Marijuana Control Program



### Manage Payments Module

The **Manage Payments** Module is available in order for any business who has active licensed facilities to view all outstanding fees, fines levied on the business, previously paid invoices, and copies of receipts for previously paid invoices.

The fees incurred by the business will include those for facility applications, facility licenses, employee licenses, and any additional request made to the Ohio Medical Marijuana Control Program that causes an impact on either a facility or employee license. Any fines levied on the business will be done so in accordance with the Ohio Administrative Code Chapter 3796.

The Manage Payments Module also allows businesses to pay fees and fines to the Ohio Department of Commerce in one of two forms; Pay by Mail or Pay Online. The Pay Now option allows the user to pay their invoices by credit card using the CBOSS payment system. The pay by mail option allows the user to print an invoice and either mail the payment to the Ohio Department of Commerce or pay in person at the Ohio Department of Commerce offices.



# Ohio Department of Commerce Medical Marijuana Control Program



## Making an Online Credit Card Payment

The eLicensing self-service portal provides any active licensed facility with the ability to make a payment for any outstanding fees incurred by the business or fines levied on the business by the Ohio Medical Marijuana Control Program for any circumstance deemed necessary in accordance with the Ohio Administrative Code Chapter 3796.

To make an online credit card payment for an outstanding fee or fine, the user should navigate to the **Manage Payments** Module upon successful login.

INVOICE NUMBER	AMOUNT DUE	INVOICE CREATED								
I-0000155	\$10.00	5/18/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	5/18/2018	
I-0000154	\$100.00	5/18/2018								
New Employee Application Fee	MMCPC00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	5/18/2018

The **Manage Payments** Module is subdivided into three sections. The first section on the **Manage Payments** Module is the Outstanding Fees section. This section lists all application fees, licensing fees, fines, and any additional request fees incurred by the business in order by the assigned invoice number.

INVOICE NUMBER	AMOUNT DUE	INVOICE CREATED								
I-0000155	\$10.00	5/18/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	5/18/2018	
I-0000154	\$100.00	5/18/2018								
New Employee Application Fee	MMCPC00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	5/11/2018
I-0000010	\$10.00	5/11/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	5/11/2018	
I-0000008	\$100.00	5/11/2018								
New Employee Application Fee	MMCPC00001	A00000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00	5/11/2018
I-0000007	\$180,000.00	5/11/2018								



# Ohio Department of Commerce Medical Marijuana Control Program



Within the Outstanding Fees area, the user will have the ability to select the invoices in which they wish to pay by selecting the checkbox to the left of the invoice number. The user may select one or multiple open invoices to be included in one payment transaction.

**Make Payments**

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

<input type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE				INVOICE CREATED				
<input checked="" type="checkbox"/>	I-0000155	\$10.00				5/18/2018				
<input type="checkbox"/>	Employee Replacement ID Fee	MMCP00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	
<input type="checkbox"/>	I-0000154	\$100.00				5/18/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-0000010	\$10.00				5/11/2018				
<input type="checkbox"/>	Employee Replacement ID Fee	MMCP00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	
<input checked="" type="checkbox"/>	I-0000008	\$100.00				5/11/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A0000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00
<input type="checkbox"/>	I-0000007	\$180,000.00				5/11/2018				
<input type="checkbox"/>	Cultivator Level I License Fee	MMCP00001	Cultivator	License Fee	Initial Application			\$180,000.00	\$180,000.00	
<input type="checkbox"/>	I-0000005	\$100.00				5/11/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A0000005	Cultivator	Application Fee	New Employee	Test Employee Four	MMCPE00003	\$100.00	\$100.00

**Pay Now** **Pay By Mail**

To select all outstanding invoices for payment, the user can simply select the checkbox at the top of the Outstanding Fees section and the system will automatically select each invoice listed.

Total Value of Selected Invoices : \$ 180320.00

**Outstanding Fees**

<input checked="" type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE				INVOICE CREATED				
<input checked="" type="checkbox"/>	I-0000155	\$10.00				5/18/2018				
<input type="checkbox"/>	Employee Replacement ID Fee	MMCP00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	
<input checked="" type="checkbox"/>	I-0000154	\$100.00				5/18/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-0000010	\$10.00				5/11/2018				
<input type="checkbox"/>	Employee Replacement ID Fee	MMCP00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	
<input checked="" type="checkbox"/>	I-0000008	\$100.00				5/11/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A0000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00
<input type="checkbox"/>	I-0000007	\$180,000.00				5/11/2018				
<input type="checkbox"/>	Cultivator Level I License Fee	MMCP00001	Cultivator	License Fee	Initial Application			\$180,000.00	\$180,000.00	
<input checked="" type="checkbox"/>	I-0000005	\$100.00				5/11/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A0000005	Cultivator	Application Fee	New Employee	Test Employee Four	MMCPE00003	\$100.00	\$100.00

**Pay Now** **Pay By Mail**



# Ohio Department of Commerce Medical Marijuana Control Program



Once one or multiple invoices have been selected for payment, the user will have the ability to view the **Total Value of Selected Invoices** field located at the top of the Outstanding Fees section which will be updated with the amount due for the selected invoices.

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

<input type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE			INVOICE CREATED				
<input checked="" type="checkbox"/>	I-00000155	\$10.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00
<input type="checkbox"/>	I-00000154	\$100.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-00000010	\$10.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00
<input checked="" type="checkbox"/>	I-00000008	\$100.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING

The user will also have the ability to select the method in which the outstanding invoices will be paid; by mail or online.

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

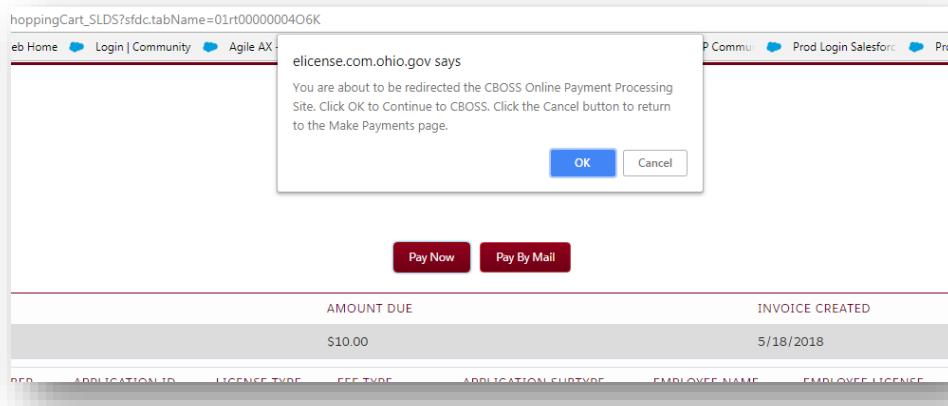
<input type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE			INVOICE CREATED				
<input checked="" type="checkbox"/>	I-00000155	\$10.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00
<input type="checkbox"/>	I-00000154	\$100.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-00000010	\$10.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00
<input checked="" type="checkbox"/>	I-00000008	\$100.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING



## Ohio Department of Commerce Medical Marijuana Control Program



If the **Pay Now** feature is selected, the user will be provided a prompt stating that the eLicensing self-service portal will be redirecting the user to the Ohio Department of Commerce Online Payment Processing system, CBOSS.



If the user selects the **OK** feature, the eLicensing self-service portal will redirect the user to the Select Payment Method screen of the CBOSS payment processing site where the user can select to pay using a credit card or electronic check.



Upon selecting the credit card payment method, the user will proceed to the Enter Payment Information screen of CBOSS. The Enter Payment Information screen of CBOSS will display to the user the high level details of the invoices selected for payment, the total amount of those invoices, and will require the user to enter the standard payment information such as the credit card number and associated details, as well as enter the associated billing information.



## Ohio Department of Commerce Medical Marijuana Control Program



The high level details of the invoice include the invoice number, the invoice amount, and the total of all invoices.

Ohio Department of Commerce – Division of Administration

Enter Payment Information

Please enter your credit card payment and billing information below. All of the fields marked with an asterisk are required.

For assistance locating the card security code, please select the following:

Locate Card Security Code

Total
\$120.00

Quantity	Description	Price	Total
1	Invoice I-0000155	\$10.00	\$10.00
1	Invoice I-0000010	\$10.00	\$10.00
1	Invoice I-0000008	\$100.00	\$100.00

\* Credit Card Number  \* Credit Card Type

\* Expiration Month  \* Expiration Year

The user will be required to enter the credit card number, credit card type, expiration month and year, and credit card security code.

\* Credit Card Number

\* Credit Card Type

\* Expiration Month

\* Expiration Year

\* Card Security Code

To complete the payment information, the user will also be required to enter the billing information associated to the payment.



## Ohio Department of Commerce Medical Marijuana Control Program



A screenshot of a payment processing form. The form contains fields for First Name, Middle Name, Last/Business Name, Phone, Address Line 1, Address Line 2, City, State/Province/Region, Zip/Postal Code, Country, and Email. At the bottom right of the form is a 'Continue' button.

Once the user has entered all required payment information in the CBOSS payment processing site, the user can select the **Continue** feature to complete the online payment process.

A screenshot of the same payment processing form as above, but the 'Continue' button at the bottom right is highlighted with a red box.

Selection of the **Continue** feature will notify the system to authenticate the payment information entered by the user is valid. If the payment information entered passes the validation check, the user will be presented with a confirmation screen where the user will be required to confirm the transaction to finalize the payment.



## Ohio Department of Commerce Medical Marijuana Control Program



The screenshot shows a payment confirmation page. At the top, the Ohio.gov logo and the Department of Commerce are visible. Below that, the text "Ohio Department of Commerce – Division of Administration" is displayed. The main content is titled "Confirm Payment Information" with the sub-instruction "Please confirm that your credit card payment and billing information below is correct." A large blue rectangular redaction box covers the payment details. Below this, a table shows the payment breakdown:

Quantity	Description	Price	Total
1	Invoice:I-0000155	\$10.00	\$10.00
1	Invoice:I-0000154	\$100.00	\$100.00
1	Invoice:I-0000008	\$100.00	\$100.00

Below the table is another large blue rectangular redaction box. The form then lists various personal and address fields:

First Name	Middle Name
<input type="text"/>	<input type="text"/>
* Last/Business Name	* Phone
<input type="text"/> Test_Account_Cultivator	<input type="text"/> (740) 824-7490
* Address Line 1	Address Line 2
<input type="text"/> 77 S High St.	<input type="text"/> 23rd Floor
* City	* State/Province/Region
<input type="text"/> Columbus	<input type="text"/> OH
* Zip/Postal Code	Country
<input type="text"/> 43215	<input type="text"/> United States
Email	
<input type="button" value="Back"/>	<input type="button" value="Confirm"/>

If the user selects the **Confirm** feature, the payment will be processed and finalized. Once the payment has been finalized within the CBOSS payment processing site, the user will be redirected to the eLicensing self-service portal **Manage Payments** Module where the user can validate completion of payment by locating the paid invoice in the Paid Invoices section. The details on Paid Invoices section has been addressed on page 61 of this manual.



# Ohio Department of Commerce Medical Marijuana Control Program



Paid Invoices										
Action	INVOICE NUMBER	AMOUNT DUE				INVOICE CREATED				
View	I-0000155	50.00				5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL	FEETOTAL
Employee Replacement ID Fee	MMCPC00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$0.00	5/18/2018
View	I-0000010	50.00				5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL	FEETOTAL
Employee Replacement ID Fee	MMCPC00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$0.00	5/18/2018
View	I-0000008	50.00				5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL	FEETOTAL
New Employee Application Fee	MMCPC00001	A0000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$0.00	5/18/2018
View	I-0000001	50.00				5/11/2018				

If the **Back** feature is selected, the user will be redirected to the CBOSS payment processing sites payment screen to make any updates necessary to the payment information before continuing with the payment process.



# Ohio Department of Commerce Medical Marijuana Control Program



## Making an Online Electronic Check Payment

The eLicensing self-service portal provides any active licensed facility with the ability to make a payment for any outstanding fees incurred by the business or fines levied on the business by the Ohio Medical Marijuana Control Program for any circumstance deemed necessary in accordance with the Ohio Administrative Code Chapter 3796.

To make an online electronic check payment for an outstanding fee or fine, the user should navigate to the **Manage Payments** Module upon successful login.

INVOICE NUMBER	AMOUNT DUE	INVOICE CREATED								
I-0000155	\$10.00	5/18/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	5/18/2018	
I-0000154	\$100.00	5/18/2018								
New Employee Application Fee	MMCPC00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	5/18/2018

The **Manage Payments** Module is subdivided into three sections. The first section on the **Manage Payments** Module is the Outstanding Fees section. This section lists all application fees, licensing fees, fines, and any additional request fees incurred by the business in order by the assigned invoice number.

INVOICE NUMBER	AMOUNT DUE	INVOICE CREATED								
I-0000155	\$10.00	5/18/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	5/18/2018	
I-0000154	\$100.00	5/18/2018								
New Employee Application Fee	MMCPC00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	5/11/2018
I-0000010	\$10.00	5/11/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	5/11/2018	
I-0000008	\$100.00	5/11/2018								
New Employee Application Fee	MMCPC00001	A00000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00	5/11/2018
I-0000007	\$180,000.00	5/11/2018								



# Ohio Department of Commerce Medical Marijuana Control Program



Within the Outstanding Fees area, the user will have the ability to select the invoices in which they wish to pay by selecting the checkbox to the left of the invoice number. The user may select one or multiple open invoices to be included in one payment transaction.

**Make Payments**

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

INVOICE NUMBER	AMOUNT DUE					INVOICE CREATED				
<input checked="" type="checkbox"/> I-0000155	\$10.00					5/18/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	
<input type="checkbox"/> I-0000154	\$100.00					5/18/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	
<input checked="" type="checkbox"/> I-0000010	\$10.00					5/11/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	
<input checked="" type="checkbox"/> I-0000008	\$100.00					5/11/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
New Employee Application Fee	MMCP00001	A0000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00	
<input type="checkbox"/> I-0000007	\$180,000.00					5/11/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
Cultivator Level I License Fee	MMCP00001		Cultivator	License Fee	Initial Application			\$180,000.00	\$180,000.00	

**Pay Now** **Pay By Mail**

To select all outstanding invoices for payment, the user can simply select the checkbox at the top of the Outstanding Fees section and the system will automatically select each invoice listed.

Total Value of Selected Invoices : \$ 180320.00

**Outstanding Fees**

INVOICE NUMBER	AMOUNT DUE					INVOICE CREATED				
<input checked="" type="checkbox"/> I-0000155	\$10.00					5/18/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	
<input checked="" type="checkbox"/> I-0000154	\$100.00					5/18/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	
<input checked="" type="checkbox"/> I-0000010	\$10.00					5/11/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	
<input checked="" type="checkbox"/> I-0000008	\$100.00					5/11/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
New Employee Application Fee	MMCP00001	A0000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00	
<input checked="" type="checkbox"/> I-0000007	\$180,000.00					5/11/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
Cultivator Level I License Fee	MMCP00001		Cultivator	License Fee	Initial Application			\$180,000.00	\$180,000.00	
<input checked="" type="checkbox"/> I-0000005	\$100.00					5/11/2018				
Fee Name	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	Fee Type	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	Fee	Fee Outst	
New Employee Application Fee	MMCP00001	A0000005	Cultivator	Application Fee	New Employee	Test Employee Four	MMCPE00003	\$100.00	\$100.00	

**Pay Now** **Pay By Mail**



# Ohio Department of Commerce Medical Marijuana Control Program



Once one or multiple invoices have been selected for payment, the user will have the ability to view the **Total Value of Selected Invoices** field located at the top of the Outstanding Fees section which will be updated with the amount due for the selected invoices.

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

<input type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE			INVOICE CREATED				
<input checked="" type="checkbox"/>	I-00000155	\$10.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00
<input type="checkbox"/>	I-00000154	\$100.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-00000010	\$10.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00
<input checked="" type="checkbox"/>	I-00000008	\$100.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING

The user will also have the ability to select the method in which the outstanding invoices will be paid; by mail or online.

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

<input type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE			INVOICE CREATED				
<input checked="" type="checkbox"/>	I-00000155	\$10.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00
<input type="checkbox"/>	I-00000154	\$100.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-00000010	\$10.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00
<input checked="" type="checkbox"/>	I-00000008	\$100.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEET OUTSTANDING



## Ohio Department of Commerce Medical Marijuana Control Program



If the **Pay Now** feature is selected, the user will be provided a prompt stating that the eLicensing self-service portal will be redirecting the user to the Ohio Department of Commerce Online Payment Processing system, CBOSS.

The screenshot shows a web page with a URL in the address bar: `hoppingCart_SLDS?sfid.tabName=01t00000004O6K`. The page content includes a message from `elicense.com.ohio.gov` stating: "You are about to be redirected the CBOSS Online Payment Processing Site. Click OK to Continue to CBOSS. Click the Cancel button to return to the Make Payments page." Below this message are two buttons: "OK" (highlighted in blue) and "Cancel". At the bottom of the page, there are two red buttons: "Pay Now" and "Pay By Mail". Below these buttons, there is a table with the following data:

AMOUNT DUE	INVOICE CREATED
\$10.00	5/18/2018

Below the table, there are several columns with labels: PRO, APPLICATION ID, LICENCE TYPE, FEE TYPE, APPLICATION SUBTYPE, EMPLOYEE NAME, and EMPLOYEE LICENCE.

If the user selects the **OK** feature, the eLicensing self-service portal will redirect the user to the Select Payment Method screen of the CBOSS payment processing site where the user can select to pay using a credit card or electronic check.

The screenshot shows the "Select Payment Method" page of the CBOSS payment processing site. The page has a header with the **Ohio.gov** logo and "Department of Commerce". The main content area is titled "Ohio Department of Commerce – Division of Administration". It contains the following sections:

- Select Payment Method**: A note saying "Please select a payment method." followed by two radio buttons:  Credit Card and  Electronic Check.
- If you have any questions, please contact:** Information about the Ohio Department of Commerce – Division of Administration, including address (6606 Tussing Road, PO Box 4009, Reynoldsburg OH 43068-9009), phone numbers ((614) 644-2622 OR 1-800-523-3581 (Ohio only) and (614) 644-3145 (FAX)), and an email address ([webdic@com.state.oh.us](mailto:webdic@com.state.oh.us)).
- Technical Support**: A note saying "If you need technical support for this online payment processing application, please send an email to [webdic@com.state.oh.us](mailto:webdic@com.state.oh.us)."

Upon selecting the electronic check payment method, the user will proceed to the Enter Payment Information screen of CBOSS. The Enter Payment Information screen of CBOSS will display to the user the high level details of the invoices selected for payment, the total amount of those invoices, and will require the user to enter the standard payment information such as the bank account number and associated details, as well as enter the associated billing information.



## Ohio Department of Commerce Medical Marijuana Control Program



The high level details of the invoice include the invoice number, the invoice amount, and the total of all invoices.

Ohio Department of Commerce – Division of Administration

Enter Payment Information

Please enter your electronic check payment and billing information below. All of the fields marked with an asterisk are required.

Your checking account number **should not** include the 4 digit check number that usually appears on your check either before or after the checking account number. For assistance locating the checking account information, please select the following:

[Locate Checking Account Information](#)

Quantity	Description	Price	Total
1	Invoice3-0000155	\$10.00	\$10.00
1	Invoice3-0000154	\$100.00	\$100.00
1	Invoice3-0000010	\$10.00	\$10.00
1	Invoice3-0000008	\$100.00	\$100.00
1	Invoice3-0000007	\$180,000.00	\$180,000.00
1	Invoice3-0000005	\$100.00	\$100.00

\* Bank Routing Number

\* Confirm Routing Number

\* Bank Account Number

\* Confirm Account Number

\* Bank Account Type

The user will be required to enter the bank routing number, bank account number, and select the bank account type

\* Bank Routing Number

\* Confirm Routing Number

\* Bank Account Number

\* Confirm Account Number

\* Bank Account Type

To complete the payment information, the user will also be required enter the billing information associated to the payment.



## Ohio Department of Commerce Medical Marijuana Control Program



First Name

Middle Name

\* Last/Business Name

\* Phone

\* Address Line 1

Address Line 2

\* City

\* State/Province/Region

\* Zip/Postal Code

Country

Email

Please note that if any of the prepopulated business account information is incorrect, the user should contact the Ohio Medical Marijuana Control program to update the information accordingly.

Once the user has entered all required payment information in the CBOSS payment processing site, the user can select the **Continue** feature to complete the online payment process.

First Name

Middle Name

\* Last/Business Name

\* Phone

\* Address Line 1

Address Line 2

\* City

\* State/Province/Region

\* Zip/Postal Code

Country

Email

Selection of the **Continue** feature will notify the system to authenticate the payment information entered by the user is valid. If the payment information entered passes the validation check, the user will be presented with a confirmation screen where the user will be required to confirm the transaction to finalize the payment.



# Ohio Department of Commerce Medical Marijuana Control Program



The screenshot shows a payment confirmation page. At the top, the Ohio.gov logo and the Department of Commerce are visible. Below that, the text "Ohio Department of Commerce – Division of Administration" and "Confirm Payment Information" are displayed. A message says "Please confirm that your electronic check payment and billing information below is correct." A large redacted area follows. Below it, a table shows payment details:

Quantity	Description	Price	Total
1	Invoice:3-00000155	\$10.00	\$10.00
1	Invoice:3-00000154	\$100.00	\$100.00
1	Invoice:3-00000110	\$10.00	\$10.00
1	Invoice:3-00000088	\$100.00	\$100.00
1	Invoice:4-00000007	\$180,000.00	\$180,000.00
1	Invoice:3-00000005	\$100.00	\$100.00

Below the table, another large redacted area follows. The next section contains bank account information:

* Bank Routing Number 0440000207	* Confirm Routing Number 0440000207
* Bank Account Number 2134567898	* Confirm Account Number 2134567898
* Bank Account Type Checking	

Below this is another large redacted area. The final section contains personal and address information:

First Name	Middle Name
* Last/Second Name Leading	* Phone 6148684157
* Address Line 1 885 Maple Nut Lane	Address Line 2
* City Westerville	* State/Province/Region OH
* Zip/Postal Code 43081	Country
Email tonicafer@gmail.com	

At the bottom, there are "Back" and "Confirm" buttons.

If the user selects the **Confirm** feature, the payment will be processed and finalized. Once the payment has been finalized within the CBOSS payment processing site, the user will be redirected to the eLicensing self-service portal **Manage Payments** Module where the user can validate completion of payment by locating the paid invoice in the Paid Invoices section. The details on Paid Invoices section has been addressed on page 61 of this manual.



# Ohio Department of Commerce Medical Marijuana Control Program



Paid Invoices											
Action	INVOICE NUMBER	AMOUNT DUE				INVOICE CREATED					
View	I-0000155		50.00			5/11/2018					
Fee Name	License Number	Application ID	License Type	Fee Type	Application Subtype	Employee Name	Employee License	Fee	Fee Outstanding	Fee Created	
Employee Replacement ID Fee	MMCPC00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$0.00	5/18/2018	
View	I-0000010		50.00			5/11/2018					
Fee Name	License Number	Application ID	License Type	Fee Type	Application Subtype	Employee Name	Employee License	Fee	Fee Outstanding	Fee Created	
Employee Replacement ID Fee	MMCPC00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	5/18/2018	
View	I-0000008		50.00			5/11/2018					
Fee Name	License Number	Application ID	License Type	Fee Type	Application Subtype	Employee Name	Employee License	Fee	Fee Outstanding	Fee Created	
New Employee Application Fee	MMCPC00001	A0000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$0.00	5/18/2018	
View	I-0000001		50.00			5/11/2018					

If the **Back** feature is selected, the user will be redirected to the CBOSS payment processing sites payment screen to make any updates necessary to the payment information before continuing with the payment process.



# Ohio Department of Commerce Medical Marijuana Control Program



## Making a Payment by Mail

The eLicensing self-service portal provides any active licensed facility with the ability to make a payment for any outstanding fees incurred by the business or fines levied on the business by the Ohio Medical Marijuana Control Program for any circumstance deemed necessary in accordance with the Ohio Administrative Code Chapter 3796.

To make a payment by mail for an outstanding fee or fine, the user should navigate to the **Manage Payments** Module upon successful login.

INVOICE NUMBER	AMOUNT DUE	INVOICE CREATED								
I-0000155	\$10.00	5/18/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	5/18/2018	
I-0000154	\$100.00	5/18/2018								
New Employee Application Fee	MMCPC00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	5/18/2018

The **Manage Payments** Module is subdivided into three sections. The first section on the **Manage Payments** Module is the Outstanding Fees section. This section lists all application fees, licensing fees, fines, and any additional request fees incurred by the business in order by the assigned invoice number.

INVOICE NUMBER	AMOUNT DUE	INVOICE CREATED								
I-0000155	\$10.00	5/18/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	5/18/2018	
I-0000154	\$100.00	5/18/2018								
New Employee Application Fee	MMCPC00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	5/11/2018
I-0000010	\$10.00	5/11/2018								
Employee Replacement ID Fee	MMCPC00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	5/11/2018	
I-0000008	\$100.00	5/11/2018								
New Employee Application Fee	MMCPC00001	A00000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00	5/11/2018
I-0000007	\$180,000.00	5/11/2018								



# Ohio Department of Commerce Medical Marijuana Control Program



Within the Outstanding Fees area, the user will have the ability to select the invoices in which they wish to pay by selecting the checkbox to the left of the invoice number. The user may select one or multiple open invoices to be included in one payment transaction.

**Make Payments**

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

<input type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE				INVOICE CREATED				
<input checked="" type="checkbox"/>	I-0000155	\$10.00				5/18/2018				
<input type="checkbox"/>	Employee Replacement ID Fee	MMCP00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	
<input type="checkbox"/>	I-0000154	\$100.00				5/18/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-0000010	\$10.00				5/11/2018				
<input type="checkbox"/>	Employee Replacement ID Fee	MMCP00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	
<input checked="" type="checkbox"/>	I-0000008	\$100.00				5/11/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A0000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00
<input type="checkbox"/>	I-0000007	\$180,000.00				5/11/2018				
<input type="checkbox"/>	Cultivator Level I License Fee	MMCP00001	Cultivator	License Fee	Initial Application			\$180,000.00	\$180,000.00	
<input type="checkbox"/>	I-0000005	\$100.00				5/11/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A0000005	Cultivator	Application Fee	New Employee	Test Employee Four	MMCPE00003	\$100.00	\$100.00

**Pay Now** **Pay By Mail**

To select all outstanding invoices for payment, the user can simply select the checkbox at the top of the Outstanding Fees section and the system will automatically select each invoice listed.

Total Value of Selected Invoices : \$ 180320.00

**Outstanding Fees**

<input checked="" type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE				INVOICE CREATED				
<input checked="" type="checkbox"/>	I-0000155	\$10.00				5/18/2018				
<input type="checkbox"/>	Employee Replacement ID Fee	MMCP00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00	
<input checked="" type="checkbox"/>	I-0000154	\$100.00				5/18/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-0000010	\$10.00				5/11/2018				
<input type="checkbox"/>	Employee Replacement ID Fee	MMCP00001	Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00	
<input checked="" type="checkbox"/>	I-0000008	\$100.00				5/11/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A0000007	Cultivator	Application Fee	New Employee	Test Employee Five	MMCPE00004	\$100.00	\$100.00
<input type="checkbox"/>	I-0000007	\$180,000.00				5/11/2018				
<input type="checkbox"/>	Cultivator Level I License Fee	MMCP00001	Cultivator	License Fee	Initial Application			\$180,000.00	\$180,000.00	
<input checked="" type="checkbox"/>	I-0000005	\$100.00				5/11/2018				
<input type="checkbox"/>	New Employee Application Fee	MMCP00001	A0000005	Cultivator	Application Fee	New Employee	Test Employee Four	MMCPE00003	\$100.00	\$100.00

**Pay Now** **Pay By Mail**



# Ohio Department of Commerce Medical Marijuana Control Program



Once one or multiple invoices have been selected for payment, the user will have the ability to view the **Total Value of Selected Invoices** field located at the top of the Outstanding Fees section which will be updated with the amount due for the selected invoices.

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

<input type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE			INVOICE CREATED				
<input checked="" type="checkbox"/>	I-00000155	\$10.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$10.00
<input type="checkbox"/>	I-00000154	\$100.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011	\$100.00	\$100.00
<input checked="" type="checkbox"/>	I-00000010	\$10.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004	\$10.00	\$10.00
<input checked="" type="checkbox"/>	I-00000008	\$100.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL

The user will also have the ability to select the method in which the outstanding invoices will be paid; by mail or online.

**General Instructions**

- Select Invoice(s) to pay.
- Click on Pay Now button to make an online payment.
- Click on Pay by Mail to Print the Invoice.

Total Value of Selected Invoices : \$ 120.00

**Outstanding Fees**

<input type="checkbox"/>	INVOICE NUMBER	AMOUNT DUE			INVOICE CREATED				
<input checked="" type="checkbox"/>	I-00000155	\$10.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001		
<input type="checkbox"/>	I-00000154	\$100.00			5/18/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL
New Employee Application Fee	MMCP00001	A00000150	Cultivator	Application Fee	New Employee	Test Employee Six	MMCPE00011		
<input checked="" type="checkbox"/>	I-00000010	\$10.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL
Employee Replacement ID Fee	MMCP00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Five	MMCPE00004		
<input checked="" type="checkbox"/>	I-00000008	\$100.00			5/11/2018				
FEE NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEETYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEETOTAL	FEETOTAL



## Ohio Department of Commerce Medical Marijuana Control Program



If the **Pay By Mail** feature is selected, a new window will open containing a PDF version of the invoice containing all fees that have been selected to be paid.

**Department of Commerce**  
Medical Marijuana Control Program

JOHN R. KASICH, Governor  
JACQUELINE T. WILLIAMS, Director

**Invoice**

TEST_ACCOUNT_CULTIVATOR	Date 05/22/2018
77 South High Street	Total Due \$220.00
Columbus, OH, 43215	

**Invoice Number:** I-0000155

**FEES**

LICENSE #	LICENSE TYPE	APPLICATION SUBTYPE	FEES TYPE	EMPLOYEE NAME	EMPLOYEE LICENSE #	FEES	FEES OUTSTANDING	DATE CREATED
MMCPC00001	Cultivator	Replacement ID Card	Application Fee	Test Employee Two	MMCPE00001	\$10.00	\$10.00	05/18/2018

**Invoice Number:** I-0000154

**FEES**

LICENSE #	LICENSE TYPE	APPLICATION SUBTYPE	FEES TYPE	EMPLOYEE NAME	EMPLOYEE LICENSE #	FEES	FEES OUTSTANDING	DATE CREATED
MMCPC00001	Cultivator	New Employee	Application Fee	Test Employee Six	MMCPE00011	\$100.00	\$100.00	05/18/2018

**Invoice Number:** I-0000010

**FEES**

LICENSE #	LICENSE TYPE	APPLICATION SUBTYPE	FEES TYPE	EMPLOYEE NAME	EMPLOYEE LICENSE #	FEES	FEES OUTSTANDING	DATE CREATED
MMCPC00001	Cultivator	Replacement ID Card	Application Fee	Test Employee Five	MMCPE00004	\$10.00	\$10.00	05/11/2018

**Invoice Number:** I-0000008

**FEES**

Please note that the **Pay by Mail** feature provides the user with several additional methods for paying their fees to the Ohio Department of Commerce. Fees may only be paid with cash or by check for the **Pay by Mail** option. Any outstanding fee may also be paid for in person at the Ohio Department of Commerce Tussing Road location.

Each invoice selected on the **Make Payments** screen will be listed sequentially on the generated invoice document.

Please note that the generated invoice document must be printed and included with the payment method information for all **Pay by Mail** or in person payment options in order for the Ohio Department of Commerce to process and apply the payment properly.

### Cash Payments by Mail:

If the user chooses to pay for an outstanding invoice by mail with cash, a representative from the business must perform the following actions:



## Ohio Department of Commerce Medical Marijuana Control Program



Print off the generated invoice and mail the invoice with the cash payment to the Ohio Department of Commerce. Please address all mail payments to:

**Ohio Department of Commerce  
ATTN: Medical Marijuana Control Program Fiscal Department  
6606 Tussing Road  
Reynoldsburg, Ohio 43068**

Please note that the Ohio Department of Commerce discourages payments in cash by mail and will not be responsible for lost or missing funds.

### **Cash Payments in Person:**

If the user chooses to pay for an outstanding invoice in person with cash, a representative from the business must perform the following actions:

Print off the generated invoice and travel to the Ohio Department of Commerce with the invoice and cash payment in hand. The Ohio Department of Commerce is located at:

**6606 Tussing Road  
Reynoldsburg, Ohio 43068**

Present the invoice along with the cash payment in person to the Ohio Department of Commerce representative who will complete the payment process and provide the payee with proof of payment.

### **Check Payments by Mail:**

If the user chooses to pay for an outstanding invoice by mail with a check, a representative from the business must perform the following actions:

Print off the generated invoice and mail the invoice with the check payment to the Ohio Department of Commerce. Please address all mail payments to:

**Ohio Department of Commerce  
ATTN: Medical Marijuana Control Program Fiscal Department  
6606 Tussing Road  
Reynoldsburg, Ohio 43068**

Please note that the Ohio Department of Commerce will not be responsible for lost or missing funds.

### **Check Payments in Person:**

If the user chooses to pay for an outstanding invoice in person with a check, a representative from the business must perform the following actions:

Print off the generated invoice and travel to the Ohio Department of Commerce with the invoice and check payment in hand. The Ohio Department of Commerce is located at:



## Ohio Department of Commerce Medical Marijuana Control Program



**6606 Tussing Road  
Reynoldsburg, Ohio 43068**

Present the invoice along with the check payment in person to the Ohio Department of Commerce representative who will complete the payment process and provide the payee with proof of payment.

### **Credit Card Payments in Person:**

If the user chooses to pay for an outstanding invoice in person with a credit card, a representative from the business must perform the following actions:

Print off the generated invoice and travel to the Ohio Department of Commerce with the invoice and credit card in hand. The Ohio Department of Commerce is located at:

**6606 Tussing Road  
Reynoldsburg, Ohio 43068**

Present the invoice along with the credit card in person to the Ohio Department of Commerce representative who will complete the payment process and provide the payee with proof of payment.



## Ohio Department of Commerce Medical Marijuana Control Program



## Viewing a Paid Invoice

The eLicensing self-service portal provides any active or inactive licensed facility with the ability to view a previously paid invoice for any fees incurred by the business or fines levied on the business by the Ohio Medical Marijuana Control Program for any circumstance deemed necessary in accordance with the Ohio Administrative Code Chapter 3796.

To view a previously paid invoice, the user should navigate to the **Manage Payments** Module upon successful login.

The **Manage Payments** Module is subdivided into three sections. The final section within the **Manage Payments** module is the [Paid Invoices](#) section. This section lists all invoices that have been paid by the associated business account. The user will see the invoice number, the amount due, and the invoice create date. The user will also be able to see the details of the invoice which include the fee name, facility license number, application ID, facility license type, fee type, application subtype, employee name (if applicable), employee license number (if applicable), fee amount, fee outstanding, and the date the fee was created.

Action	INVOICE NUMBER			AMOUNT DUE			INVOICE CREATED			
<a href="#">View</a>	I-0000004			\$0.00			5/11/2018			
FEES NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEES TYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEES	FEES OUTSTANDING	FEES CREATED
New Employee Application Fee	MMCPC00001	A0000003	Cultivator	Application Fee	New Employee	Test Employee Three	MMCPE00002	\$100.00	\$0.00	5/11/2018
<a href="#">View</a>	I-0000003			\$0.00			5/11/2018			
FEES NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEES TYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEES	FEES OUTSTANDING	FEES CREATED
Employee Replacement ID Fee	MMCPC00001		Cultivator	Application Fee	Replacement ID Card	Test Employee Two	MMCPE00001	\$10.00	\$0.00	5/11/2018
<a href="#">View</a>	I-0000002			\$0.00			5/11/2018			
FEES NAME	LICENSE NUMBER	APPLICATION ID	LICENSE TYPE	FEES TYPE	APPLICATION SUBTYPE	EMPLOYEE NAME	EMPLOYEE LICENSE	FEES	FEES OUTSTANDING	FEES CREATED

Within the **Paid Invoices** area, the user will have the ability to view a paid by selecting the **View** action.



## Ohio Department of Commerce Medical Marijuana Control Program



Action	INVOICE NUMBER	
<b>View</b>	I-0000014	
FEE NAME	LICENSE NUMBER	APPLICATION I
New Employee Application Fee	MMCPO0001	A00000011
<b>View</b>		I-0000013
FEE NAME	LICENSE NUMBER	APPLICATION I
New Employee Application Fee	MMCPO0001	A00000010

Upon selecting the **View** action for a paid invoice, the invoice detail will display. The user will see all pertinent information associated to the paid invoice including the invoice status, invoice date, invoice amount, the associated receipt number (if applicable), and transaction number (if applicable).

Ohio.gov | Department of Commerce  
Medical Marijuana Control Program

Home | Licenses | Manage Employees | Manage Payments

Invoice - I-0000182

Invoice Details

Status	Paid	Invoice Date	05/18/2018
Invoice Amount	120.00	Due Date	06/18/2018
Total Payments	120.00	Creator	Test Account
Balance Due	0.00	Transaction Number	
Receipt Number	R-0000182		

Please note that the receipt number and transaction number fields will only display a value if the invoice was paid using the Ohio Department of Commerce CBOSS payment processing site.



## Ohio Department of Commerce Medical Marijuana Control Program



### Viewing a Receipt for a Paid Invoice

The eLicensing self-service portal provides any active or inactive licensed facility with the ability to view the receipt document for a previously paid invoice for any fees incurred by the business or fines levied on the business by the Ohio Medical Marijuana Control Program for any circumstance deemed necessary in accordance with the Ohio Administrative Code Chapter 3796.

To view the receipt document for a previously paid invoice, the user should navigate to the **Manage Payments** Module upon successful login.

Action	Receipt Number	Amount Tendered	Payment Method	Transaction Number	Receipt Created
<a href="#">View</a>	R-0000002	\$100.00	Credit Card	3	5/11/2018

The **Manage Payments** Module is subdivided into three sections. The second section within the **Manage Payments** module is the Receipts section. This section lists all receipts for any previous payments made by the associated business account. The user will see the receipt number, the amount paid, the payment method used when paying any fee or fine, the transaction number, and the date the receipt was created.

Action	Receipt Number	Amount Tendered	Payment Method	Transaction Number	Receipt Created
<a href="#">View</a>	R-0000002	\$100.00	Credit Card	3	5/11/2018

Within the Receipts area, the user will have the ability to view a receipt document for a paid invoice by selecting the **View** action.



## Ohio Department of Commerce Medical Marijuana Control Program



Action	Receipt Number	Amount Tendered
<a href="#">View</a>	R-0000002	\$100.00

Upon selecting the **View** action for a receipt, the receipt detail will display. The user will see all pertinent information associated to the receipt including the receipt number, receipt amount, payment amount, and transaction number.

Receipt Details

Number	Amount
R-0000182	120.00

Invoices

Number	Application ID	License Name	Employee Name	Status	Invoice Amount	Total Payments	Balance Due	Transaction Number
I-0000155	MMCP00001	Test Employee Two		Paid	10.00	10.00	0.00	1
I-0000010	MMCP00001	Test Employee Five		Paid	10.00	10.00	0.00	2
I-0000008	MMCP00001	Test Employee Five		Paid	100.00	100.00	0.00	3

The receipt detail screen will also provide the user with information around the fees included on the invoice associated to the receipt and access to the receipt document.



## Ohio Department of Commerce Medical Marijuana Control Program



Receipt Details

Number	R-0000002	Amount	100.00
Payment Method	Credit Card	Transaction Number	3

Invoices

Number	Application ID	License Name	Employee Name	Status	Invoice Amount	Total Payments	Balance Due	Transaction Number
I-0000001	A00000001	MMCPC00001	Test Employee One	Paid	100.00	100.00	0.00	3

Fee Payments

Number	Application ID	License Name	Invoice Number	Fee Type	Fee Amount	Payment Amount	Fee Current Amount Outstanding	Transaction Number
0000002	A00000001	MMCPC00001	I-0000001	Application Fee	100.00	100.00	0.00	3

Notes and Attachments

Actions	FILE NAME	LAST MODIFIED DATE
View	MMCPC_Receipt_20180511.pdf	5/11/2018 2:55 PM
View	MMCPC_Receipt_20180511.pdf	5/11/2018 11:41 AM
View	MMCPC_Receipt_20180511.pdf	5/11/2018 12:24 PM

Within the Notes and Attachments area on the receipts detail screen, if the user selects the View action, a new window will open containing a PDF version of the receipt containing all fees that are associated to the paid invoice.



**Medical Marijuana Control Program**  
77 South High Street • 23rd Floor  
Columbus, OH 43215-6120

**PAYMENT RECEIPT**

**Receipt No: R-0000002**

**Payment Method: Credit Card**

**Paid By: Test Account** **Paid To: Treasurer, State**

DESCRIPTION	LICENSE	AMOUNT
Application Fee	MMCPC00001	\$ 100.00

**TOTAL: \$100.00**

**DATE: 05/11/2018**

Please note that if the invoice was not paid using the Ohio Department of Commerce CBOSS payment processing site, a receipt detail record and receipt document will not be available to the user.



## Ohio Department of Commerce Medical Marijuana Control Program



### Questions or Comments?

If you have any questions or comments, please contact the Ohio Department of Commerce Medical Marijuana Control Program using one of the following methods of communication:

**By Email:**

[mmcp@com.state.oh.us](mailto:mmcp@com.state.oh.us)

**By Phone:**

+1-614-466-3636

**By Mail:**

The Ohio Department of Commerce  
ATTN: MMCP  
77 South High St, 23rd Floor  
Columbus, OH 43215