

## PREPARING DOCUMENTS FOR SIGNATURE IN PDF

Create interactive forms for signature that can be used by anyone, ensuring privacy and independence for all. The Prepare Form Wizard in Adobe Acrobat Pro can be used to create interactive forms from an existing electronic document (for example a Word, PDF, or Excel document) or from a paper form that was placed in a scanner with the resulting image opened in Acrobat.

- 1. If working from a word document, Save the File as a PDF first.
- 2. Open the working file in Adobe Acrobat Pro.
- 3. Once the file is open in Adobe Acrobat Pro, click on the **Tools** pane.
- 4. Start by selecting the **Prepare Forms** Wizard from the Tools pane. (See "Figure 1. Prepare Form Wizard")
- 5. On the next screen select "Start"
- 6. Adobe Acrobat Pro will then analyze the document, add any detected form fields, and puts the document in Forms Editing Mode. The document will look similar to what is shown in "Figure 2. Forms Editing Mode". From here, you can **add, edit or delete** the automatically created fields.
- 7. Select and delete any fields that are not needed.
  - a. To clear the whole document or a large section, click and drag your mouse over the document or those sections you want to remove and hit the "Delete" key on your keyboard.
- 8. Go to the part of the document where signatures are required.
- 9. Utilize the Form Editing Toolbar (See "Figure 3. Form Editing Toolbar") and **select the "Digital Signature" icon**.
- 10. Click where the signature is required and a signature field will appear. Adjust the field space accordingly.
  - a. Repeat for each additional signature, if additional signatures are required.
- 11. Once all fields are in place, select the "**Close**" button on the right side of the Form Editing Toolbar and **Save** the document.
- 12. **Email** the document to the proper recipients for signature, reminding the last to sign that they will need to select the "Lock Document After Signing" checkbox before inserting their signature.

<b>FIGURE 1.</b> Prepare Form Wizard	<b>FIGURE 2.</b> Forms Editing Mode	<b>FIGURE 3.</b> Form Editing Toolbar
	<ul> <li>Prepare Form *</li> <li>I Please complete the entire claim form along with corresponding section and s</li> <li>One of the following must be attached as supporting documentation (always to Health Care Reimbursement Account: an itemized bill from the provider sign to of service, service performed, and cost.</li> <li>Dependent Care Reimbursement Account: a bill or receipt showing dates applicable dependent information. You may also have the provider sign to</li> </ul>	☐☐ Iext Field ✓ Check Box ⓒ Radio Button ■■ List Box
Open -	Employee Name     Image: Street     Image: Street     Image: Street     Image: Street       City     Image: Street     Image: Street     Image: Street       HEALTH CARE EXPENSES:     Image: Street     Image: Street	Dr <u>o</u> pdown Button Digital Signature MIMI Barcode