| Test Issue Log | **SCP ID# :**  |
| --- | --- |
| **Project Name:** | AGROBANK BUSINESS INTERNET BANKING |
| **Test Stage:** | [ ] Unit [x] Functionality [ ] Integration [ ] System [ ] Interface [ ] Performance [ ] Regression [ ] Acceptance [ ] Pilot |
| **Test Case Number:** | Support #7159 | **Test Started Date:** | 21/02/2017 |
| **Test Title:** |  |
| Test Description: | To ensure error message pop up displayed: Invalid Total Amount for entered alphabets on ‘Total Amount’ field. |
| Test Functionality: | **BIB*** Payroll > Statutory Bodies > EPF
 |
| Test Procedure: | 1. On excel upload file, enter alphabets on ‘Total Amount’ field.
2. Perform to upload file on BIB.
 |
| Test Result: | Pass: [x]  Fail: [ ]  | Tested by: | Erni Suhaireen binti Zulkifli |
| Reason for Failure: |  |
| **TEST DESCRIPTION** |
| **Screenshot:****Set empty/alphabets on ‘Employer Contribution’ at upload excel file**1. Set empty/alphabets on ‘Employer Contribution’ field
* Empty

* Alphabets

**Perform Upload File**1. On Statutory Body – EPF page:
	1. Select “From Account” from the dropdown List
	2. Click “Browse” button and attached the Form A file
	3. Enter the “Remarks”
2. Click on ‘Next’ button.
* Empty

**Current error Message Displayed:** Employer Contribution Amount is required on line number [4].**Expected Error Message Displayed:** Employer Contribution Amount is required on line number [4]. * Numeric

**Current error Message Displayed:** Employer Contribution Amount should be numeric on line number [4]**Expected Error Message Displayed:** Employer Contribution Amount should be numeric on line number [4] |
| **Reviewed By: (PMO)** |
| **Signature.JPG** | **Name/Position : Norhaidah Binti Md Dasuki / Senior Manager, Quality Assurance and Support****Date :**  |