DIRECT EXPENDITURE FORM

CSU, San Bernardino -- Accounts Payable x75155

| Date: | | | Vendor/Claimant Name: | | | | | |
|---|----------------------|-----------------|--|-------------------------------|---|---------------------------------------|----------------------------|--------|
| Dept: | | | Remittance Address: | | | | | |
| Contact & Ext. | | : | Address is manda if not on attached | itory | | | | |
| E-mail Address | S | | | documentation. | | | | |
| Amount: | | | G: | | | | | |
| | | | Sış | gnature: | (Author | ized to charge acco | ount) | _ |
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| | Account | Fund | DeptID | Class | Proje | ect | ٦ | |
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| (Pleas | e provide com | plete and acci | ırate account | information in | the box al | oove to avoid d | delays or returns.) | |
| MANDATOR | Y: Please ex | olain purpo | se/benefit | to the unive | sity of th | nis expenditu | are request: | |
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| Payable at x75155 | | | | | • | | | |
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| [] Permit/License Fee | | | [] Freight/Shipping | | | [] Personal Reimbursement (see below) | | |
| · · | | | | Medical Svc [] Contractor Dep | | | | |
| [] Game Guarantee [] Insurance [] College of Extended and Global | | | | (athletics only | tics only) [] Payment to UEC or Philanthropic Fdn [] DGS Car Rental | | | L |
| Education Tour Arrangement | | | | | [] STEP related activities | | | |
| Education Tour Arrangement | | | | | | | el Related Participant Fee | |
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| Personal reimbur | coments are s | ubject to appr | oval by Proc | uramant A gan | aric invoic | e and Unautho | orizad Durchasa | |
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| Accounts Payable Us | e Only | | | Vndr | # | | Ck# | |
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| Procurement Appro | val (if required) | Date | | Enter | cu | | ACVICWOU. | |