

# California State University Fresno

## Direct Pay & Hospitality Approval Form

Date: \_\_\_\_\_ Check One:  Supplier  Student  Employee ID# \_\_\_\_\_

Payee Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/St: \_\_\_\_\_ Zip: \_\_\_\_\_

**Payee Certification:**  
I certify that this is a true and just invoice for which payment has not been received.

Signature \_\_\_\_\_

**Description of Expenditure:**

**Membership Justification:** (Explain purpose or benefit to the University)

**Food/Hospitality Justification:** (Explain how this expenditure will benefit the educational mission of the University)

Date of Expenditure:  
Event/Function Name:  
Location:  
Off Campus Attendees:

**PRE-APPROVAL SIGNATURE FOR FOOD/HOSPITALITY** \_\_\_\_\_  
(Please forward this request to Procurement JA 111 for pre-approval prior to food/hospitality purchase. If approved, this form will then be returned to your department to submit to Accounting with your request for payment)

**Special Instructions to Accounts Payable:**

**Department Must Complete**

Contact Person	Phone
Department Name	M/S
Amount	
Authorized Name (Print)	Authorized Name Signature
Approval Signature	
Provost/V.P. (Retreats must be approved by Provost or V.P.)	

**Accounting Use Only**

Group #		Voucher #	
Payee / Loc #		Invoice Date	
Invoice #			
Amount		Due Date	
Use Tax	Corp / 1099		
	<input type="checkbox"/>	<input type="checkbox"/>	
Check Date		Check #	
Comments			

Procurement Approval \_\_\_\_\_ Financial Aid (if applicable) \_\_\_\_\_

**PeopleSoft Chartfields**

Account	Fund	Department	Class	Project	Amount
					\$
					\$

**Attach one Invoice per Direct Pay & send to Accounts Payable @ JA 58**