CAL POLY POMONA FOUNDATION, INC.

DISBURSEMENT VOUCHER

Cal Poly Pomona ENTERPRISES

VENDOR #: _____

VENDOR NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE #: _____

Select One Box

☐ STUDENT

☐ FACULTY / STAFF

☐ OTHER _____

BRONCO ID #: _____

REFERENCE PURCHASE ORDER # CPF:

Mark (X) on box

☐ Partial Payment

☐ Full Payment

Invoice Date	Invoice Number	Benefit to/ Purpose for University/Foundation	Description/Persons Attending (attach a list if more room is needed)	Project Number	Object Number	Amount
	Mark (X) on the box if State property. Please fax supporting documents to University Asset Management at 909-869-4113 or email assetmanagement@cpp.edu, so they can tag it. Please use object code 7344 for these type of expenses.				Subtotal	$ 0.00
Out of State Purchases of Tangible Goods		*Add: Sales Tax @9.50 % (exclusive of freight/handling charges)				
		Less: Sales Tax paid directly to State Board of Equalization if not included on the invoice. *Use the same $ amount for the above line.		190010-2302		
Out of State Payment for Services		Less: Out of State Tax withholding @7%, if >$1,500/yr - Submit Form 590		190010-2232		
		Less: Foreign Tax withholding for services @ 30% (unless tax treaty) - Submit Form 8233 and W-7 Form		190010-2236		
BRONCO ID #:		Add to Bronco card (Bronco Bucks), please enter:		Less: Add to Bronco Bucks 190010-2352		
		Amount :	DATE:			
					GRAND TOTAL	$ 0.00

This expenditure benefits the educational mission of the CSU and meets the policy requirements of the Education Code Section 89904.6, Section 9.2 Policy on Expenditure of Funds for CSU Auxiliary Organizations and is in compliance with the University Related Project Agreement. The item(s) above has/have been received and or service(s) has/have been performed to the satisfaction required and if applicable, the items and or services are in compliance with the terms and conditions of the grant and/or contract.

PRINT DEPARTMENTAL APPROVAL NAME

DEPARTMENTAL APPROVAL Signature DATE
*President, Vice President, Dean, Principal Investigator or Departmental Approval (or their Designee)

PREPARED BY _____ EXTENSION # _____

PRINT SECOND DEPARTMENTAL APPROVAL NAME (if applicable)

SECOND DEPARTMENTAL APPROVAL Signature DATE
(if applicable)

ENTERPRISES FINANCIAL SERVICES APPROVAL DATE

Wire transfer must be approved by Enterprises CFO =>

ENTERPRISES CFO or DESIGNEE APPROVAL DATE
(Wire Transfer)

If wire transfer is $10,000 or over, must also be approved by Enterprises CEO =>

ENTERPRISES CEO APPROVAL DATE
(Wire Transfer >$10K)

Please type in the number generated from the link in this box: >>> #
a new browser window will open with the number

* See Expenditure Policy Grid and refer to required Authorized Signer.

REV. 02/2025