

CSUSM  
 CORP  
 THE FOUNDATION  
 ASI  
**ACCOUNTS PAYABLE DIRECT PAY FORM**

**DATE:** 06/14/18

NOTE: This form is to be used for:

- Employee reimbursements other than employee travel
  - Purchases not requiring a purchase order, service agreement; or contract
  - Transactions not eligible for ProCard
- This form may not be needed if all information is contained on an invoice. (See Guidelines on Page 1 for details.)
- Please see Page 1 for Direct Pay Guidelines prior to completing this form.
  - Please use ProCard for appropriate items.
  - Attach original receipts /documentation. (Please include additional copy of back-up to be sent with the check to vendor if appropriate)
  - Unapproved, non-qualifying, or incomplete requests will be returned unprocessed to the originating requestor.
  - Submit Direct Pay Form to Accounts Payable in Craven 4600. Please allow 10 working days to receive payment from the date Account Payable receives the direct pay form/invoice.

<b>PAYEE:</b>	Karen Haynes
<b>Remittance Address:</b> (Required)	[REDACTED]
Not our Organization address	

**PAYMENT : Please enter letter of Qualifying Item (QI) from Direct Pay Guidelines in box below**

<b>QI Letter:</b>	<p><u>Description and purpose/how it benefits the mission of the Organization:</u> Meal reimbursements while at the Council of President's Spouse Retreat in Squaw Valley. One of the dinners included dinner with the honorary degree recipient.</p> <p><u>If purchase is a commodity, the employee receiving the commodity must acknowledge that it is the Organization property and it will not leave the campus at any time without the prior approval of the appropriate person. Please have the employee sign below.</u></p> <p>Signature </p>
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If QI Letter "H", AP will review for appropriateness:

**AUTHORIZATION**

	Account	Fund	Dept ID	Class	Program	Project	Amount
<b>Funding Source:</b>	660090	96015	1082			81700	\$909.56
							\$
							\$

<b>Requested By Printed Name:</b>	Alicia Mondragon	<b>Ext.:</b>	4043
<b>Approving Authority Printed Name:</b>	Alicia Mondragon	<b>Ext.:</b>	4043
<b>Approving Authority Signature:</b>	<i>Alicia Mondragon</i>	<b>Date:</b>	6/21/18
<b>Project Approving Authority Printed Name:</b>	Alicia Mondragon	<b>Ext.:</b>	4043
<b>Project Approving Authority Signature:</b>	<i>Alicia Mondragon</i>	<b>Date:</b>	6/21/18

**Please use blue ink for signature (signature stamps not accepted)**

**CORP/Foundation ONLY ADVANCE PAYMENT ACKNOWLEDGEMENT (to be signed by Payee if requesting an advance)**

Upon receipt of advance payment in the above mentioned amount, I agree to clear/repay the advance payment within 30 days. I will be held personally liable for any non-payment of the above amount. If I am a CORP employee, I hereby authorize CORP to deduct, from my final pay check, any balance owed and not paid back upon the termination of my employment.

\_\_\_\_\_  
Payee Signature

\_\_\_\_\_  
Date

6/8/18  
lunch




**THE COUNTER**

San Diego Terminal 1 Rotunda  
(858) 668-9529  
thecounter@highflyingfoods.com

265 Blanca R

-----  
Chk 39                  MICK  
  Jun08'18 11:46AM

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1 ANGUS BEEF - Swiss -	11.25
Brioche Bun	
2 FRIES	7.50
1 ANGUS BEEF - American -	11.25
Brioche Bun	
3 WATER SMALL	8.76
1 Fountain Soda	3.10
XXXXXXXXX 	
AMER EXPRESS	45.10
FOOD	30.00
BEVERAGE	11.86
TAX	3.24
PAYMENT	45.10

-----215 Check Closed-----  
-----Jun08'18 11:50AM-----

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THANK YOU FOR VISITING

SERVE CLOCKWISE  
LEFT TO RIGHT



Date	Table	Guests	Server	
6/9	9	4	1B	73983

APPT - SOUP/SAL - ENTREE - VEG/POT - DESSERT - BEV

1	2 Caesar	24
2	1 Salmon	36
3	1 Chicken	32
4	2 Halibut	72
5		
6		
7		
8	4 Dessert	60
9		
10		
11		
12		
13		
14		
15		

Thank You!

419.35

Food	224-
Beverage	167-
Subtotal	391-
Tax	28.35
<b>Total</b>	<b>419.35</b>

926

Date	Amount	Guests	73983
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Guest Receipt

GRAHAMS OF SQUAW VALLEY  
1650 SQUAW VALLEY RD  
OLYMPIC VALLEY CA 96146  
530-581-0454

6/9/18  
Dinner  
with  
Honorary  
Degree.  
The  
Stearns.

Terminal ID: \*\*\*\*643 \*\*\*6

6/9/18 8:38 PM

AMERICAN EXPRESS - INSERT  
AID: A000000025010001  
ACCT #: \*\*\*\*\*

CREDIT SALE

UID: 816021394643 REF #: 4915

BATCH #: 434 AUTH #: 853125

AMOUNT \$419.35

TIP \$ 80.00

TOTAL \$499.35

APPROVED

ARQC - 06B15BD4856FE107

CUSTOMER COPY

HUGH TRAIN COFFEE SHOP  
10080 BONNER PASS RD  
TRUCKEE CA 96160  
530-587-7574

Merchant ID: 000085112605  
Term ID: 00716430 Ref #: 0070  
Server ID: 1

Sale

\*\*\*\*\*  
AMEX Entry Method: Swiped  
Amount: \$ 31.39  
Tip: 6.00  
Total: 37.39

6/10/18  
lunch

06/10/18 13:28:39  
Inv #: 000070 Appr Code: 541671  
Apprvd: Online Batch#: 000038

Customer Copy

6/11/18 Dinner

CHRISTY HILL  
115 GROVE STREET  
TAHOE CITY, CA 96145

CHECK #: 7974  
Date: Jun 11, 2018 Time: 8:54pm  
Server: Charles Table# D7  
Guests: 10

\*\* Customer Copy \*\*

Christy Hill Restau  
115 Grove Street  
Tahoe City, CA 96145  
(530) 583 - 8551

Monday, June 11, 2018 8:52:56 PM

4-*MARTINI	40.00
4-GL CREMANT	48.00
1-*MARTINI	10.00
2-NEAL ZIN	90.00
3-SEARED FOIE	66.00
2-OCTOPUS	34.00
1- CAESAR SALAD	14.00
1- BEET SALAD	13.00
1- CAESAR SALAD	12.00
3- DUCK	126.00
1- ENTREE GNOCCHI	36.00
1- CHICKEN BREAST	33.00
1- HALIBUT	39.00
1- TAGLIATELLE	27.00
2- LAMB	80.00
1- BISTRO STEAK	35.00
1-CH MONTELENA CHAR	67.00
2-PATZ PINOT	128.00
2-POT DE CREME	18.00
1-TOFFEE CAKE	10.00
2-BREAD PUDDING	16.00
1-CHEESECAKE	9.00
1-FOIE SORBET	8.00

=====  
 Sub Total: 959.00  
 + SALES TAX: 62.42  
 + BAR EXC: 7.10  
 Amount Due: 1028.52  
 AMEX: 205.70  
 AMEX: 205.70  
 M/C: 205.70  
 M/C: 205.70

Balance: 205.72

Type: AMEX Chk: 7974  
Acct #: [REDACTED] XX/XX Batch #: 83  
Auth #: 574579 Seq: 12 Table: D7  
Serv #: Charles

Sale: \$ 205.70

+Tip 4330

Total 249.00

  
**RESORT AT SQUAW CREEK™**  
 LAKE TAHOE

Arrival **08-Jun-2018** Folio Number **35A6FO**  
 Departure **10-Jun-2018** Balance

**Karen Haynes**  
 [Redacted]  
**United States**

Nights **2** Date **10-Jun** Time **10:55:20** Page # **1**

Date	Room	Description	Charges	Payments
22-Mar-18	R0EXKS	XXX [Redacted]		571.35
08-Jun-18	425	GROUP BAR RATE	259.00	<i>\$318.77 Not to be reimbursed</i>
08-Jun-18	425	Resort Amenity	30.00	
08-Jun-18	425	Room Tax	25.90	
08-Jun-18	425	Resort Amenity Tax	3.00	
08-Jun-18	425	CA Tourism Assessment	0.78	
08-Jun-18	425	CA Tourism Assessment	0.09	
09-Jun-18	425	Rm Svc Breakfast #6260	78.72	<i>Direct pay</i>
09-Jun-18	425	GROUP BAR RATE	259.00	<i>\$318.77</i>
09-Jun-18	425	Resort Amenity	30.00	
09-Jun-18	425	Room Tax	25.90	
09-Jun-18	425	Resort Amenity Tax	3.00	
09-Jun-18	425	CA Tourism Assessment	0.78	
09-Jun-18	425	CA Tourism Assessment	0.09	
10-Jun-18	425	XXX [Redacted]		144.91
Totals for Sub-Folio: 1			716.26	716.26
BALANCE			716.26	716.26
<b>Reservation Paid in full - Thank You</b>				0.00