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INTRODUCTION

Associated Students, Incorporated (ASI), Cal Poly Pomona is a registered non-profit corporation which is completely operated and funded by the students of Cal Poly Pomona. ASI also serves as an auxiliary organization for the University, providing numerous programs, services, and a wide range of opportunities for student involvement in campus activities. Specifically, ASI includes the Administration Office, Bronco Events and Activities Team (BEAT), Bronco Recreation and Intramural Complex (BRIC), Bronco Student Center (BSC), Financial Services, Human Resources, Marketing, Design, and Public Relations (MDPR), Student Activities and Programs, and Student Government. The Children’s Center is also a partnership between ASI and Cal Poly Pomona University. ASI and the Bronco Student Center are funded mainly by the ASI and Bronco Student Center fees. The deposit, investment, and expenditure of these funds are subject to the Education Code (Sections 89300-89304), The California State University regulations, and Cal Poly Pomona.

ASI is subject to an annual financial audit by an independent CPA firm and periodic audits by the University. In addition, ASI is also contracted by the University to administer Instructionally Related Activities (IRA) funds on its behalf. ASI also maintains a variety of agency accounts for clubs and organizations registered by the University Office of Student Life (OSL). This handbook is designed to assist student clubs and organizations, IRA groups and ASI departments to comply with ASI policies and procedures.

Office Locations and Telephone Extensions

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<th>Bronco Student Center, Building 35</th>
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ASI Financial Services

ASI Financial Services serves as the corporate accounting office for ASI. The Financial Services Office is where most of your organization’s financial activity will take place. Financial Services is responsible for handling cash deposits, processing disbursement checks and purchase orders, preparing financial reports, and assisting with other financial transactions. The Financial Services Office is also available to provide financial advice and assistance to all of its account holders.

There are four separate funds that are handled by ASI Financial Services. All clubs and organizations will fit into one of these specific funds. The funds are Agency (Club accounts), Associated Students Incorporated (ASI, student body fee), Instructionally Related Activities (IRA), and ASI Facilities & Operations (F&O, student union fee).

ASI Financial Services Office & Contact Information

| Location: Bronco Student Center, Building 35, Room 2123 |
| Operation Hours: 8:15AM – 5PM (Monday-Friday) |
| See website for in-person and virtual office hours and to set up appointments |
| Main Line Contact: (909) 869-2800 |
| Fax: (909) 869-6858 |
| Website: https://asi.cpp.edu/financial-services/ |
GENERAL POLICIES & PROCEDURES

ASI Account Registration Form & Agency Fund Administration Agreement

All funds are required to maintain a current ASI Account Registration Form on file with the Office of Student Life (OSL) to activate an existing account or start a new one in conjunction with OSL, if they are a new agency account holder. An ASI Account Registration Form is valid for one academic year, and provides pertinent information needed for ASI Financial Services such as the purpose of the account, expected sources of income, disposition of funds, etc.

Agency funds are also required to maintain a current Agency Fund Administration Agreement on file with the Office of Student Life to activate an existing account or start a new one in conjunction with OSL, if they are a new agency account holder. Please be sure to read the Agency Agreement in its entirety prior to signing the Signature Form.

- ASI Account Registration Form and Fund Administration Agreements must be submitted and signed via OnBase by the current president of the club or organization.
- ASI Account Registration Form must be submitted and signed via OnBase by IRA account holder
Filling in the ASI Account Registration Form

It is the club or organization’s responsibility to submit an ASI Account Registration Form via OnBase. The club or organization must first be registered with OSLCC to submit this form. The current president, or account administrator for IRA groups, must be the individual to submit the Account Registration Form.

(Refer to page 3 for the ASI Signature Form)

1. Indicate what type of account and whether you are establishing a new account with ASI or are activating an already existing account. Note the account name (club/organization name) and the date the form will be submitted – if registering a new group.
2. The Purpose of Account and Type of Expenditure to be Made explains why your club/organization needs an account and what your club/organization will be spending the account funds on (i.e. equipment, travel, etc.).
3. The Expected Sources of Income explains how your club plans to generate income that will be deposited into the account (i.e. contributions, sales, dues, etc.).
4. The Disposition of Funds designates what will happen to the funds in your account when the account is inactive or closed. This is according to your club/organization’s by-laws and must include a non-profit or charitable organization.
5. The club must also be registered or re-registered with OSLCC to be created or activated.
6. Indicate if your club has an off-campus bank and whether it is approved by the university. (This includes checking accounts from bank services such as Chase, Bank of America, Wells Fargo, etc.)
7. The account administrator is the account’s designated primary handler and contact for the account. For clubs, this is the president. The phone number and e-mail address will be the contact that ASI Financial Services communicates with, in case there is an error with a disbursement request, budget, or additional documentation is needed.

Reviewing the Agency and Donation Fund Administration Agreement

(Refer to page 6-3 for the Agency Fund Administration Agreement)

1. Read over the terms and conditions of the Agency Fund Administration Agreement.
   a. It is important to read over and understand the terms and conditions so that your organization may open and maintain an agency account with ASI.
**ASI Account Registration Form**
California State Polytechnic University, Pomona

**ASI Account Registration Form**
For screen reader users, please press spacebar to attach documents in the Advisor Appointment Form attachment section (for Web).

### GROUP ACCOUNT INFORMATION

1. **Type of Club or Unit**
   - [ ] Club
   - [ ] Unit

2. **Type of Request**
   - [ ] New Group
   - [ ] Existing Group

3. **Official Name of Group**

4. **Purpose of Account and Type of Expenditure to be Made**
   (Please indicate why the account is needed and the type of expenditures that will be made. For example, equipment, travel, etc.)

5. **Expected Sources of Income**
   (Please indicate sources of income e.g., contributions, sales, revenue, dues, etc.)

6. **Disposition of Funds**
   (If nonprofit organization designated for donation of funds when account is inactive or closed)

7. **Registered with CSULCC?**
   - [ ] Yes
   - [ ] No

8. **Does your group have an off-campus bank account?**
   - [ ] Yes
   - [ ] No

### CONTACT INFORMATION

- **Group Account Administrator Name**
- **Advisor Name**
- **Date**
- **Email Address**
- **Phon number (Numbers Only)**

**Save/Submit**
In compliance with the Integrated California State University Administrative Manual (ICSUAM) Policy 3141.01 and the authorization of the University President for Associated Students, Inc. (ASI) to serve as administrator for the Agency Fund (on-campus accounts for registered student organizations), this Agreement outlines the terms and conditions governing the administration of student organization funds in the ASI Financial Services Office and the services provided to Agency Fund Account holders (AFAs). Student organization account holders are required to fully comply with the terms and conditions outlined in this Agreement in order to open and maintain their accounts in ASI Financial Services.

**ELIGIBILITY FOR AGENCY FUND ACCOUNT**

Student organizations which are registered with the University Office of Student Life and Cultural Centers (OSLCC) and are in good standing are eligible to open and maintain an Agency Fund Account (AFA) in ASI Financial Services. AFAs are non-interest earning accounts.

**SIGNATURE FORMS**

AFA holders are required to maintain a current signature form on file with specimen signatures for all authorized student and advisor signers. AFA holders are responsible for keeping its signature form updated when there are changes in authorized signers.

**AGENCY ACCOUNT FUNDS**

Funds that are held in Agency accounts include membership dues and fees, prizes/awards from competitions, and fundraising income, including monies generated through food sales, item sales, ticket charges for University-approved programs, revenue from University-approved volunteer activities and similar means. Student organization funds may not be raised through the sale of alcohol or tobacco products.

**FUNDS ADMINISTRATION**

Monies collected in the name of the student organization must be maintained in an ASI AFA. Cal Poly Pomona does not allow student organizations to maintain off-campus bank accounts. Exceptions to the on-campus banking requirement and other funds administration rules may be granted by the University Chief Financial Officer (CFO) on a case-by-case basis. At no time shall a student organization deposit funds into an unauthorized bank account.

Student organization bank accounts cannot be used to hold funds on behalf of other student organizations. Funds may be held by a student organization on behalf of another external organization only on a temporary basis, in conjunction with a fundraising event where a check for the proceeds will be issued to the outside organization. For example, a student organization has a fundraiser for the American Red Cross where funds will temporarily remain in the student organization’s bank account until the net proceeds from the event are reconciled and a check request is submitted to remit the funds to the Red Cross.
DEPOSITS

Upon submission of cash and checks, ASI shall issue a cash receipt to the AFA. Cash receipts shall be credited to the AFA’s account. Items returned by the bank for any reason shall be debited from the AFA’s account. Collection procedures against returned items shall be the responsibility of AFA. Any service charges resulting from items returned by the bank shall be charged to the AFA’s account. Currently the service charge for returned checks due to non-sufficient funds (NSF) is $40.00.

DONATIONS UNDER $3,000

Funds that are held in ASI Donation accounts include monies generated through a charitable cash donation made by an individual or an organization to an ASI group. Donations up to $3,000 per donor, per year may be deposited into an ASI Donation account. Gift Processing completes the gift record in the University Advancement database, will generates the charitable tax receipt and send the receipt to the donor.

DONATIONS OVER $3,000

The solicitation, acceptance, and deposit of donations and contributions are governed by University policy. The Cal Poly Pomona Philanthropic Foundation (CPPPF) is authorized, per a Master Agreement, to receive donations on behalf of the University. In order for CPPPF to receive donations for registered student organizations and for University Advancement to issue a tax receipt, the check must be made out to CPPPF and the student organization must have a CPPPF account to receive donations. Student organizations must go through their college or division to set up a CPPPF account that can accept donations.

CASH HANDLING PROCEDURES

All AFA holders are required to comply with prescribed cash handling policy & procedures. Any violation of these cash handling policy & procedures shall be reported to the University and potentially jeopardize the registration status of the student organization or have the students involved subject to disciplinary action, as appropriate.

EXPENDITURES FROM ACCOUNT

All disbursements from Agency Accounts must comply with the purpose(s) indicated on the Application and comply with ASI, University and CSU policies. Funds may not be used for faculty and staff salary & fringe benefit expenses, hazing activities or for the purchase of alcohol, tobacco, or other such items that violate the University and auxiliary policies.

All invoices shall be paid no later than the terms of the invoice. ASI reserves the right to deny requests for expenditures that are not consistent with the purpose(s) for which the account was established and are not in compliance with ASI, University and CSU policies.

CHECKS AND PURCHASE ORDERS

Upon submission of a properly executed Disbursement Request (DR) or Purchase Order (PO) Request, ASI shall issue checks or purchase orders as instructed against the AFA’s account. A completed DR is required to include supporting documentation such as receipts, invoices, proof of payment and similar audit trail documents. Checks shall be ready for disbursement after a minimum of five (5) business days following receipt of the completed DR.

Supporting documentation such as work order estimates, quotes and similar audit trail documents shall be attached to Purchase Order Requests. Purchase Orders shall be ready by the 3 business days.
FINANCIAL REPORTS

Upon request, the ASI shall issue to AFA holder a financial report of all accounting activity posted to the Agency account through the date indicated. Questions on transactions processed by the ASI will be directed to the Agency Fund Accounts Payable Specialist. The ASI will make corrections and/or adjustments to completed and posted transactions only with the approval of the ASI Director of Financial Services.

TRAINING SUPPORT

ASI Financial Services collaborates with OSLCC in providing training to the treasurers and other executive officers of student organizations annually.

OVEREXPENDITURE OF ACCOUNT

All disbursements from AFAs shall be fully covered by the current account balance. Otherwise, ASI reserves the right to deny requests for checks or P.O.’s from the account for which there is no sufficient balance. No expenditure of funds from the AFA shall be allowed until the account is determined to have sufficient funds.

INACTIVE AGENCY ACCOUNTS

If for one fiscal year, there are no transactions on the AFA, the balance in the account shall be transferred to a suspense account. Notice shall be issued to AFA holder 30 days prior to the transfer. Funds shall be held in the suspense account for a period not to exceed three fiscal years, after which they shall be transferred to the account or designated purpose indicated in their registration documents on file with OSLCC.

LIABILITY FOR EVENTS AND ACTIVITIES

Funds deposited to AFAs are not under the programmatic or budgetary control of ASI. Accordingly, ASI assumes no liability for events and activities sponsored by the AFA holder and for which AFA funds are used. The AFA holder agrees to:

1. Indemnify and hold harmless ASI, its officers, agents and employees from any and all losses, costs, damages of any nature or description whatsoever, accruing or resulting to AFA in connection with any and all activities sponsored in part or in whole through the use of funds held in the AFA.

2. Indemnify and hold harmless the ASI, its officers, agents and employees from any and all claims and losses accruing or resulting to any person, firm, or corporation, which may involve injury or death to any individual’s or damage to any property, due to the actions of the AFA officers, agents or employees in the performance of any and all activities sponsored in part or in whole through the use of funds held in the AFA.

TERMINATION

This agreement may be cancelled by either party upon delivery of written notice thereof. The AFA holder shall allow seven business days for remittance of remaining funds in its account by ASI.

Figure 2 Agency Fund Administration Agreement
Policy Statement
The ASI Budget Guidelines and Stipulations protect the financial and legal interests of the Associated Students, Inc. (ASI), the CPP, and the CSU by ensuring compliance with federal, state, local laws; California State University System (CSU) and California State Polytechnic University Pomona (CPP) policies, procedures, and regulations; audit standards and good business practices; and viewpoint neutral procedures related to the allocation of mandatory student fee funds.

All entities funded by the ASI Fee and the ASI Facilities & Operations Fee shall comply with this policy by adhering to the ASI Budget Guidelines and Stipulations.

Non-compliance with these budget guidelines and stipulations may result in ASI sanctions determined to be appropriate by the ASI Treasurer, in consultation with the ASI Director of Financial Services and the ASI Executive Director, including and up to non-eligibility for ASI annual and mid-year funding support. For additional information or clarification refer to the Smart Spending Manual, visit the ASI Financial Services website and consult the ASI Treasurer or the ASI Director of Financial Services.

Annual Budget Requests
1. **Eligibility**: Registered Student Clubs and Councils, recognized Heritage Programs, and ASI Departments
2. **Budget Workshop**: The president and the treasurer of each registered Student Clubs and Councils shall attend the mandatory budget workshop conducted by ASI Financial Services as part of the annual registration process in order to submit a budget request. In addition, the president and the treasurer of each registered Council shall also attend a second budget workshop regarding the administration of council funds and allocations to registered Student Clubs.
3. **Notification**: ASI Financial Services shall notify registered Councils and Heritage Programs regarding their recommended ASI allocations based on the Student Opportunities Initiative. Upon final budget approval, ASI Financial Services shall notify all groups of the approved amounts.
4. **Submission Deadlines**: Registered councils are required to set deadlines for registered Student Clubs. All deadlines shall be communicated to the groups and posted on the website by ASI Financial Services. ASI Departments shall be notified separately of their budget deadlines.
5. **Budget Request Submission**: Registered Student Clubs shall submit the Budget Request Forms to their respective registered Council. All others shall submit directly to ASI Financial Services.
6. **Viewpoint Neutrality**: All ASI fee-funded organizations (i.e., Board of Directors, Finance Committee, registered Councils) shall maintain a documented viewpoint neutral process for allocating ASI funds. CPP registered Councils shall be signed by authorized officers and submitted annually to ASI Financial Services during the budget process.

7. **Budget Transfer Submission (registered Councils only)**: In addition to submitting a budget for themselves, registered Councils shall distribute at least 85% of their ASI funding to registered Student Clubs. Each registered Council’s elected Executive Board shall decide how much to allocate to registered Student Clubs based on viewpoint-neutral funding criteria. Registered Councils shall submit the following:
   a. Budget Transfer Form indicating the amount to be transferred to each registered Student Club
   b. Viewpoint-Neutral Funding Process Form signed by authorized officers documenting the organization’s viewpoint-neutral budget allocation process
   c. Budget Request Forms submitted by registered Student Clubs

8. All ASI Departments receiving an approved ASI budget allocation must develop and justify their budget requests annually. ASI Departments shall deliberate internally to review, adjust, and balance all budget requests before submitting to ASI Financial Services. ASI Financial Services shall consolidate all budget requests to submit a balanced budget to the Board of Directors.

**Release of Funds**

9. ASI annual budgets shall be released in two phases to protect against unexpected enrollment decline. Upon final approval of the ASI Annual Budget, seventy percent (70%) shall be released to ASI fee-funded groups (ASI reserves, registered Student Clubs and Councils, Heritage Programs, and ASI Departments). The release of the thirty percent (30%) balance shall be contingent on actual enrollment through Fall Semester. The ASI Board of Directors shall take action on any recommendation to release less than 30% of the annual budget allocations with a 2/3 vote of the seated Board.

10. F&O annual budgets shall be released to ASI Departments in lump sums (100%) upon final budget approval. The source of F&O budget is the F&O fees collected in the prior year. Therefore, the release of F&O annual budgets is not contingent upon current year’s actual enrollment.

**Additional Budget Requests**

11. **Eligibility**: Registered Student Clubs and Councils may be eligible for additional funding if the annual budget amount allocated was deemed insufficient.
   a. ASI Treasurer or ASI Financial Services shall consult with the Office of Student Life & Cultural Centers (OSLCC) and the appropriate ASI Senator to confirm that the registered Student Club or Council requesting additional budget is in good standing and provide the information to the ASI Finance Committee.
   b. If the budget request is dismissed by the ASI Finance Committee or the ASI Board of Directors, the request shall not be eligible for resubmission for the same program or event unless an exception is recommended by the ASI Treasurer.
c. With the exception of new clubs, registered Student Clubs are required to submit and obtain funding approval for their annual budget from their registered Council first. A copy of the Annual Budget must be verified and on file with ASI Financial Services.

d. New registered Student Clubs unable to receive an annual budget from their registered Council may apply for funding through this process.

e. Retreats, banquets, or other general club expenses are not eligible for additional budget request.

12. **Submission Deadlines:** Additional budget requests are considered on a rolling basis. However, requests shall be submitted before the event occurs. Additional budget requests for events between July and September may be submitted after the fact, but expenses shall reflect actual expenditures.

13. **Budget Request Submission:** Budget Request Form shall be submitted to the ASI Finance Committee through the ASI Treasurer.

a. The requesting group shall provide a budget presentation at a regularly scheduled meeting of the ASI Finance Committee and/or the ASI Board of Directors. Failure to present to the ASI Finance Committee and/or the ASI Board of Directors shall result in dismissal of the club's request.

b. The budget request must reflect the approved allocation from the registered Council.

14. **Funding Cap:** Additional funding request is capped at $6,000 per group per year, not to exceed $750 per person for a conference, convention, or program. More than one request is permitted per budgeted year, not to exceed a total of $6,000. Mid-year budget requests are funded by the New Programs and Augmentation (NP&A) fund.

15. **Notification:** The ASI Treasurer shall notify the requestor of the final decision, including the approved amount (if applicable), of the additional budget request.

16. **Event Cancelation:** In the event the funded program/event is canceled, the registered Student Club or registered Council must notify Financial Services to return funds to ASI.

17. The following shall apply to funding requests from The Green Initiative Fund (TGIF):

a. Budgets requests shall not exceed $15,000 from TGIF for any on-campus sustainability project.

b. Allocations from TGIF shall be subject to the provisions of the ASI Reserves Policy and Sustainability Committee Code.

c. Multiple allocations from TGIF for the same project are not allowed.

d. The Finance Committee can allocate up to a total of 70% of the account for the fiscal year. The remaining 30% may only be allocated upon 2/3 approval of the seated Senate.

**Unspent Funds at Year End**

18. Any unspent (carryover) ASI Department funds at year end shall revert to ASI reserves. For registered Student Clubs and Councils, any actual carryover in excess of budgeted carryover shall be repossessed and transferred to the following accounts: New Programs and Augmentations (65% of funds), ASI Prior Years II (15% of funds), ASI Prior Years III (10% of funds), and The Green Initiative Fund (10% of funds).

19. The ASI Board of Directors reserves the right to repossess, by a majority vote, carryover from any organization with designated allocations.
20. Registered Student Clubs that have been inactive for two (2) consecutive years shall have their carryover repossessed and transferred to the following accounts: New Programs and Augmentations (65% of funds), ASI Prior Years II (15% of funds), ASI Prior Years III (10% of funds), and The Green Initiative Fund (10% of funds).
ASI and ASI Facilities & Operations Fund Restrictions

ASI and ASI Facilities & Operations mandatory student fees shall not be used for the following purposes (restriction does not apply to Agency or Donation accounts as indicated with an asterisk). Any such activity may lead to legal, University-sanctioned, or ASI-authorized consequences including, but not limited to, suspension or revocation of allocated student fees by ASI and potential loss of future privileges.

1. Honoraria, stipends, or speaker’s fees to any Cal Poly Pomona or auxiliary employee, unless they are “off the clock” and not performing their campus or auxiliary duties.
2. [ASI Public Relations & Hospitality Policy] (items 2 to 4) Refreshments at regularly scheduled business meetings or personal events such as birthdays, showers, wedding and similar occasions. However, refreshments may be provided in relation to recruitment, training, speaker presentations and recognition purposes.
3. Flowers in connection with illness, hospitalization, or funeral*
4. Gifts for birthdays, showers, weddings, or similar occasions or gift cards. However, non-cash awards (e.g., plaques, award certificates) for achievement and recognition are allowed, provided that the amount and frequency are reasonable.
5. Events or fundraisers with the intent of generating additional income.*
6. [CPP Alcohol & Other Drugs Policy] Alcohol, tobacco, and other items prohibited by CSU policies and applicable laws and regulations.
7. [CSU Auxiliary Organization Compliance Guide] Support or opposition of any candidate for public office, whether partisan or not, or to support any issue before the voters (including all matters before legislative bodies) of the state or any subdivision thereof or any city, municipality or local government entity of any kind, as may be permitted by Section 89300 of the Education Code (Section 42403 of Title V). The only exceptions are authorized governmental affairs representatives (Education Code Section 89300).
8. Student scholarships, with the exception of ASI elected and appointed student leaders.
9. [ASI Sponsorship and Partnership Policy] University-funded programs and activities, with the exception of ASI approved partnerships.
10. Instructionally Related Activities (IRA)-funded groups.
11. Insurance expenses for individuals: premiums for student health insurance and excess medical; and insurance expenses for groups: auto insurance and group travel accident insurance. Exception: ASI’s budgeted insurance requirements for University-authorized programs and services [Executive Order 1068 for Club Sports Insurance].
12. [CPP Discrimination, Harassment & Retaliation policy] Engaging in harassment or discrimination conduct.
13. [Student Conduct Code] Any activities in violation of the student conduct code, including but not limited to hazing or hazing related activities (Education Code Section 32050-32051).
14. Violate the First Amendment of US Constitution [viewpoint discrimination]. All ASI fee-funded organizations (i.e., Board of Directors, Finance Committee, registered Councils) shall maintain a documented viewpoint neutral process for allocating ASI funds. CPP registered Councils shall be signed by authorized officers and submitted annually to ASI Financial Services during the budget process.
* Allowable under Agency and ASI F&O funds
Financial Reporting

Profit & Loss Report
Upon request, Financial Services can provide a Profit & Loss (P&L) report of all accounting activities posted to an organization’s account through a requested date. A P&L provides information on an account’s income (funds deposited into the account), carryover (funds carried over from the previous fiscal year), expense (funds taken out of the account), purchase orders, and the funds in the account to date.

Questions on transactions processed by ASI will be directed to the appropriate Fund Accounts Payable Specialist. ASI will make corrections and/or adjustments to transaction completed and posted on the account only with the approval of the ASI Director of Financial Services.

Student clubs and orgs must be fully registered with the Office of Student Life to have their account activated prior to any request for financial reports. Individuals from an organization must be listed on the group’s Account Registration Form as an authorized signer to receive P&L reports. To request a financial report, visit the Financial Services office located on the second floor of the Bronco Student Center or send an email to asifs@cpp.edu using your authorized @cpp.edu email.

Account information cannot be given over the phone. (See page 2 for ASI Financial Services Office and Contact Information)

Please see below for how to properly read your club’s P&L Report.
<table>
<thead>
<tr>
<th>Date</th>
<th>Amount</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/17/14</td>
<td>12345</td>
<td>Transaction 1</td>
</tr>
<tr>
<td>2/18/14</td>
<td>67890</td>
<td>Transaction 2</td>
</tr>
<tr>
<td>2/19/14</td>
<td>45678</td>
<td>Transaction 3</td>
</tr>
<tr>
<td>2/20/14</td>
<td>12345</td>
<td>Transaction 4</td>
</tr>
<tr>
<td>2/21/14</td>
<td>67890</td>
<td>Transaction 5</td>
</tr>
<tr>
<td>2/22/14</td>
<td>45678</td>
<td>Transaction 6</td>
</tr>
<tr>
<td>2/23/14</td>
<td>12345</td>
<td>Transaction 7</td>
</tr>
<tr>
<td>2/24/14</td>
<td>67890</td>
<td>Transaction 8</td>
</tr>
<tr>
<td>2/25/14</td>
<td>45678</td>
<td>Transaction 9</td>
</tr>
</tbody>
</table>

Note: This report is printed at the start of the month for current account total.
REVENUE POLICIES AND PROCEDURES

CASH HANDLING

Refer to Senate Bill 2015-2016:14 for the full version

All funds of ASI and IRA budget groups must be deposited with Financial Services. This would also include mid-year budget request funding and council allocations. Registered organizations and agency account holders must also deposit funds with Financial Services.

Funds that are held in Agency and IRA accounts include membership dues and fees, prizes/awards from competitions, and fundraising income, including monies generated through food sales, item sales, ticket charges for University-approved programs, revenue from University-approved volunteer activities and similar means. Student organization funds may not be raised through the sale of alcohol or tobacco products.

Upon submission of cash and checks, ASI shall issue a cash receipt to the depositor. Cash receipts shall be credited to the organization’s account. Items returned by the bank for any reason shall be debited from the organization’s account. Collection procedures against returned items shall be the responsibility of the organization. Any service charges resulting from items returned by the bank shall be charged to the organization’s account.

All account holders are required to comply with prescribed cash handling policy & procedures. Any violation of these cash handling policy & procedures shall be reported to the University and potentially jeopardize the registration status of the student organization or have the students involved subject to disciplinary action, as appropriate.

Segregation of Cash Handling Duties

Segregation of duties must be maintained when cash is received. No single person should have complete control. If student clubs and organizations are unable to comply with the following requirements due to lack of resources, mitigating controls must be implemented to prevent and detect loss from fraud or negligence.

Segregation of Cash Handling Duties Guidelines:

1. Cash handling activities require daily supervision and review.
2. The storage and inventory of blank receipt stock must be handled by someone other than the cash handler.
3. Deposit counts must be verified by a second person.
4. Returns, refunds and write-offs, as well as inventory of returned items, must be approved by someone other than the cash handler.
5. Payments received through mail must be verified, processed by someone other than the cash handler, and restrictively endorsed for deposit or electronically deposited by the close of business on the date of receipt.
6. The person receiving cash, issuing cash receipts, and preparing the deposit should not be the same person who performs reconciliation, enters journal entries, and reviews financial statements and activities.
Club president/designee(s) is charged with the following responsibilities

1. Authorize/Designate cash handler responsible for handling cash and cash equivalents. Cash Handler must be someone who didn’t collect the cash or open the mail.
2. Ensure that a current account registration form with a list of authorized student and advisor signers is submitted to ASI Financial Services upon registration.
3. Ensure that all signers/cash handlers attend the annual mandatory “Fundamentals of Club Accounts” training which covers cash handling.
4. Ensure that cash handling is operated in accordance with CSU and ASI policies and procedures.
5. Ensure that cash and cash equivalents are held in a secured area until deposited.
6. Ensure deposits are made daily, even if it is a small amount. Deposits should never be held longer than five business days.

Check Requirements
To be accepted for deposit, each check presented must be payable to Associated Students Incorporated (ASI), the Bronco Students Center (BSC), or the name of the registered student club or organization. In addition, checks are required to:
   1. Be recently dated -no stale dated checks shall be accepted (i.e. personal checks that are over 180 days old).
   2. Be properly signed by the owner of the account.
   3. Be in agreement as to numeric and written amounts. When the numeric and written amounts on a check do not agree, a new check should be requested.
   4. Be legibly written in ink or typed.
   5. Have Federal Reserve routing codes printed as part of the MICR encoding at the bottom of the check.
   6. The check must be payable to the club/organization’s account.

Departments or student clubs and organizations must maintain a listing of checks that are not payable to Associated Students Incorporated (or ASI), the BSC (or Bronco Student Center), or the name of the registered student club or organization. These checks must be forwarded to the appropriate entity (if identifiable), or returned to the payee no later than 30 days from receipt.

The following checks should not be accepted:
   1. Checks bearing the legend “Payable/Paid in Full.”
   2. Checks drawn on foreign bank accounts that are not acceptable at face value by the depository bank (e.g. if drawn in a foreign currency).

Returned Check Processing
When ASI Financial Services receives a notice of Non-Sufficient Funds (NSF) from the bank, it is given to the ASI Accounting Technician for appropriate handling. The depositor is notified and the appropriate account is debited.

Acceptance of Cash or Cash Equivalents
Only U.S. currency and coins should be accepted. ASI Financial Services does not accept foreign currencies. Cash equivalents include checks, cashier’s checks, and money orders which can be accepted at cash handling stations and by student clubs and organizations.
Receiving & Depositing Funds with ASI Financial Services

Information Regarding COVID-19:
To ensure the safety of our account holders and staff we are only accepting deposits by appointment only. To schedule an appointment please visit our website.

1. Student clubs and organizations shall be accountable for the collection and deposit of cash and checks received.
2. An official receipt shall be recorded for each collection using a pre-numbered receipt book or a daily receiving log in circumstances where it is not practical to use a receipt book. The cash receipt and daily receiving log must be signed by an authorized signer.
3. ASI Financial Services maintains a current signature form for each registered student club and organization with names and signatures from authorized student and advisor signers.
4. Upon receipt of a check, an authorized signer for the student club or organization shall endorse the back of the check “For Deposit Only”.
5. At no time shall student clubs and organizations accept credit or debit cards.
6. Complete the “ASI Deposit Form”. Deposits of cash and checks must be on separate forms (See page 20 for How to Fill out a Deposit Form).
7. Deposits must be taken to the ASI Financial Services within a week (5 business days) of receipt or daily if accumulated cash is greater than $300 or if total of checks is greater than $2,000.
8. Student clubs and organizations shall keep cash and or checks in a secure location at all times.
How to Filling in the Cash Handling Forms

Deposit Form

DEPOSITS OF CASH AND CHECKS MUST BE ON SEPARATE FORMS
(Refer to page 20 for cash deposits and page 21 for check deposits)

A completed deposit form includes:

1. Club/organization name and the account number that funds are being deposited into.
   a. If you do not know your account number, Financial Services can assist you.
   b. Student clubs can only deposit into their Agency account.
2. Name of the person making the deposit and indication whether or not they are an authorized signer on the account’s signature form.
   a. Anyone can make deposits. This is for Financial Services record.
3. If depositing cash, write in the dollar amount for each type of coin and bill. Add up the dollar amounts of coins and the dollar amounts of bills and in the indicated fields, write in the totals for coins, bills, and the overall amount for all cash deposited. Be sure to record the dollar amount.
4. If depositing checks, write in each check number and the corresponding amount. All check dollar description must match the dollar amount shown. Add up the total dollar amount of all checks and write the sum amount in the Totals field.
   REMINDER: Cash and checks deposits are made on separate forms.
5. The Total Deposit amount on the cash form should be the sum of all coins and bill and the Total Deposit on the check form should be the sum of all check amounts. Cash and checks deposits are made on separate forms so the Total Deposit should never be the sum of both cash and checks deposits.

Cash Receipt Log

(Refer to page 22 for the Cash Receipt Log)

The Cash Receipt Log can be used in place of a sales receipt book to keep track of sales transactions per event such as bake sales, membership dues, etc. Collection of cash and checks may be recorded on the same log. As cash and checks are collected, the cash handler records the date the cash or check is received, the purpose for the collection, and the amount of each collection. Two separate individuals should count and verify the cash and checks received. The Cash Receipt Log does not need to be submitted to Financial Services. Clubs and organizations should maintain the Cash Receipt Log as part of their internal financial records.

A completed cash receipt log includes:

1. Write in the club/organization name and the account number that you are depositing into.
   If you do not know the account number, Financial Services can assist you.
   a. Student clubs can only deposit into their Agency account.
2. For each collection of cash or check, no matter how small the amount, indicate the date the cash or check was received, the purpose for the collection, whether the collection was cash or check, and the amount of each collection.
3. Add up the total of all collections. This amount should be the same as the corresponding deposit form’s Total Deposit.
4. Two separate individuals should count and verify the cash and checks received.
DEPOSIT FORM

Sample Form Deposit

3S0123

Student Club/Organization Account Number

Name of Depositor

Authorized Signer on Account

Date

List of Deposits

<table>
<thead>
<tr>
<th>COIN</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pennies</td>
<td>$0.24</td>
</tr>
<tr>
<td>Nickles</td>
<td>$0.85</td>
</tr>
<tr>
<td>Dimes</td>
<td>$0.10</td>
</tr>
<tr>
<td>Quarters</td>
<td>$3.75</td>
</tr>
<tr>
<td>Half Dollar</td>
<td></td>
</tr>
<tr>
<td>Dollar</td>
<td></td>
</tr>
</tbody>
</table>

Total Coin $ 4.94

<table>
<thead>
<tr>
<th>CURRENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1</td>
</tr>
<tr>
<td>$2</td>
</tr>
<tr>
<td>$5</td>
</tr>
<tr>
<td>$10</td>
</tr>
<tr>
<td>$20</td>
</tr>
<tr>
<td>$50</td>
</tr>
<tr>
<td>$100</td>
</tr>
</tbody>
</table>

Total Currency $ 381.00

Cash Grand Total $ 385.94

**If the number of checks are greater than 20, please enter the total number of checks under the check number column and submit a calculator tape.

**

TOTAL DEPOSIT (checks only) $ 0.00
**DEPOSIT FORM**

**Student Club/ Organization**
Sample Form Society

**Student Club/Organization Account Number**
3S0123

**Name of Depositor**
Jason Sakamoto

**Authorized Signer on Account**
YES [ ] NO [ ]

**Date**
01/21/2020

---

### List of Deposits

<table>
<thead>
<tr>
<th>COIN</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pennies</td>
<td></td>
</tr>
<tr>
<td>Nickles</td>
<td></td>
</tr>
<tr>
<td>Dimes</td>
<td></td>
</tr>
<tr>
<td>Quarters</td>
<td></td>
</tr>
<tr>
<td>Half Dollar</td>
<td></td>
</tr>
<tr>
<td>Dollar</td>
<td></td>
</tr>
<tr>
<td>Total Coin</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CURRENCY</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1</td>
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<tr>
<td>$2</td>
<td></td>
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<td>$5</td>
<td></td>
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<td>$10</td>
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</tr>
<tr>
<td>$20</td>
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<tr>
<td>$50</td>
<td></td>
</tr>
<tr>
<td>$100</td>
<td></td>
</tr>
<tr>
<td>Total Currency</td>
<td>$0.00</td>
</tr>
<tr>
<td>Cash Grand Total</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHECKS</th>
<th>CHECK NUMBER</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1234</td>
<td>$84.20</td>
</tr>
<tr>
<td>2</td>
<td>98765</td>
<td>$15.60</td>
</tr>
<tr>
<td>3</td>
<td>135</td>
<td>$80.42</td>
</tr>
<tr>
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<td>792468</td>
<td>$79.48</td>
</tr>
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<td>5</td>
<td></td>
<td></td>
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<tr>
<td>19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL DEPOSIT (checks only)</strong></td>
<td>$259.70</td>
<td></td>
</tr>
</tbody>
</table>

---

**Figure 4 Deposit Form - Check**

---

**If the number of checks are greater than 20, please enter the total number of checks under the check number column and submit a calculator tape.**
## CASH RECEIPT LOG

**Sample Form Society**

**Student Club/Organization/Department Account Number**

<table>
<thead>
<tr>
<th>DATE</th>
<th>PURPOSE</th>
<th>CASH/CHECK</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/23/20</td>
<td>SMALL TANK TOP</td>
<td>CASH</td>
<td>$15</td>
</tr>
<tr>
<td>5/23/20</td>
<td>SMALL TANK TOP</td>
<td>CASH</td>
<td>15</td>
</tr>
<tr>
<td>5/23/20</td>
<td>LARGE SHIRT</td>
<td>CHECK</td>
<td>20</td>
</tr>
<tr>
<td>5/23/20</td>
<td>MEDIUM TANK TOP</td>
<td>CASH</td>
<td>15</td>
</tr>
<tr>
<td>5/23/20</td>
<td>MEDIUM TANK TOP</td>
<td>CASH</td>
<td>15</td>
</tr>
<tr>
<td>5/26/20</td>
<td>SMALL TANK TOP</td>
<td>CASH</td>
<td>15</td>
</tr>
<tr>
<td>5/26/20</td>
<td>MEDIUM TANK TOP</td>
<td>CASH</td>
<td>20</td>
</tr>
<tr>
<td>5/26/20</td>
<td>LARGE SHIRT</td>
<td>CHECK</td>
<td>15</td>
</tr>
<tr>
<td>5/26/20</td>
<td>LARGE TANK TOP</td>
<td>CASH</td>
<td>20</td>
</tr>
</tbody>
</table>

**GRAND TOTAL**

150

*Can not be the same person and must be an authorized signor on the account*

---

**Figure 5 Cash Receipt Log**
STUDENT CLUB FUNDRAISING
(Refer to page 27 for the Student Club Fundraising Infographic)

Highlights
- Charitable gifts can now be deposited directly to your ASI Fundraising account and no fees will be incurred
- Your donated dollars will be deposited directly into ASI donation account—easy to access and spend
- You can spend each and every dollar you raise!

What is a Charitable Gift?
- In order to issue a charitable tax receipt, no goods or services may be given in exchange for the gift
- For example, a bake sale or car wash where the donor is receiving something would not be eligible for a charitable tax receipt
- When a friend, family member or other supporter gives your club money and you give nothing in return, that is a donation to your student club where CPP Gift Processing will issue a charitable tax receipt

What is a Non-Charitable Gift?
- If there’s an exchange of goods or services for a donation, then the donation is not charitable, and the donor will NOT receive a charitable tax receipt
- Any money collected for selling things such as a bake sale is not charitable

Processing a Charitable Gift
- Before you ask for money, you MUST coordinate with the CPP Gift Processing office to review all solicitation materials
- Alternatively, you can use the standard introduction letters and thank you letters from the links below without additional approval from CPP Gift Processing
- Gifts to fraternities and sororities are not charitable per IRS regulations

What to Do with Funds
- Make checks out to Associated Students, Inc. (or ASI) with student club name in memo
- Mail checks to:
  Cal Poly Pomona Gift Processing PO Box (ensures timely processing)
  PO Box 3121
  Pomona, CA 91769
- Deposit will be made directly into ASI donation account
- CPP Gift Processing will issue a charitable tax receipt to donor
- Follow ALL ASI cash handling procedures—submit any checks received in-hand to ASI Financial Services by next business day and ASI Financial services will contact CPP Gift Processing to pick up your check
- Online giving: http://give.cpp.edu/studentclub

Crowdfunding
• All student clubs are eligible to apply for a crowdfunding project
• All the money will go to your cause and no additional fees will be incurred
• Crowdfunding is only for donations—not for personal fundraising, events or ticket sales

How to Launch a Successful Crowdfunding Campaign
1. What is your goal? Be specific
   By when do you need to reach your goal?
2. How will you achieve your goal?
   Minimum of 8 ambassadors who can commit to reaching out to 20 people each
3. What project materials can you collect before launching your crowdfunding campaign?
   These include photos, videos, project description, etc.
4. Who will be the leaders of your campaign?
   Is it your fundraising chair, treasurer, president, etc.?

Crowdfunding Application
• Go to crowdfund.cpp.edu
• Click on ‘submit an application’ in the top-right menu
• Fill out the form and click ‘submit project’
• The annual giving team will review your application and will be in touch

Charitable Donation Policy
• While the Cal Poly Pomona Philanthropic Foundation is the official auxiliary for all philanthropic contributions to Cal Poly Pomona entities, there are some efficiencies for allowing an alternate method. As such, the Cal Poly Pomona Philanthropic Foundation will allow Associated Student, Inc. (ASI), by virtue of its status as a nonprofit 501(c)(3) organization, to accept cash donations designated for student clubs and organizations only if they are less than $3,000 per donor per year.
• Gifts of $3,000 or more per donor per year must be deposited to the Cal Poly Pomona Philanthropic Foundation.
• Gifts of stocks will still be processed to the Cal Poly Pomona Philanthropic Foundation
• Gifts made via one payment source comingle with a Cal Poly Pomona Philanthropic program and a registered student club or organization will still be processed to the Cal Poly Pomona Philanthropic Foundation and transmitted to ASI.
• Crowdfunding gifts received online will be processed to the Cal Poly Pomona Philanthropic Foundation and transmitted to ASI.
• Gifts to ASI for student clubs and organizations will be processed by Gift Processing in University Advancement and deposited to ASI.
• Solicitation of gifts in excess of $1,000 will need to be coordinated with University Development.
• Solicitation of gifts in conjunction with an event or sponsorship require review of all solicitation materials by the Gift Processing Specialist prior to sending any solicitation.
• Gift Processing will be responsible for donor acknowledgement and issuance of receipts for gifts it processes.
• If available, matching gifts will be pursued by the Gift Processing department
# Charitable Donation Procedures

<table>
<thead>
<tr>
<th>Responsible Party:</th>
<th>Action:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Club/Advisor</td>
<td>1. Receiving the Gift</td>
</tr>
<tr>
<td>Gift Processing/ASI</td>
<td>2. Depositing the Gift</td>
</tr>
<tr>
<td>Gift Processing/ASI</td>
<td>3. Processing the Gift Record and Acknowledgement</td>
</tr>
<tr>
<td>Gift Processing/ASI</td>
<td>4. Transferring Cal Poly Pomona Philanthropic Foundation “Direct” Donations to the ASI Financial Services office</td>
</tr>
<tr>
<td>Gift Processing/ASI</td>
<td>5. Transmitting Donation Transaction to ASI</td>
</tr>
</tbody>
</table>

## 1. Receiving the Gift
Upon receipt of a donation, the student organization or advisor contacts the Office of Student Life and Cultural Centers (OSLCC) who will contact the Gift Processing office to pick up the donation along with associated donor information. If ASI Financial Services receives the donation directly, they will contact Gift Processing to pick up the check. To provide the best donor experience possible, all gifts must be processed in a timely fashion. The Gift Processing Office should be contacted for pick up as soon as a donation is received by a student or OSLCC. In addition, ASI and Gift Processing must comply with Cal Poly Pomona Philanthropic Foundation cash handling policy regarding timely deposits.

## 2. Depositing the Gift
Gifts less than $3,000 per donor per year, will be processed by and deposited to the ASI bank account by the Gift Processing Department.

Gifts of $3,000 or more per donor per year, gifts of stock, or gifts received from one payment source comingle with a Cal Poly Pomona Philanthropic Foundation donation will be processed through the Cal Poly Pomona Philanthropic Foundation. Gift Processing will deposit the donation into the Cal Poly Pomona Philanthropic Foundation fund in support of the student club. The student club will spend donated funds from the Foundation with the assistance of their faculty or staff advisor and area budget analyst.

## 3. Processing the Gift Record and Acknowledgement
Gift Processing completes the gift record in the University Advancement database, will generates the charitable tax receipt and send the receipt to the donor.

## 4. Transferring Cal Poly Pomona Philanthropic Foundation “Direct” Donations to the ASI Financial Services office
Once a month or whenever feasible, ASI donations received directly by the Cal Poly Pomona Philanthropic Foundation will be transmitted to ASI Financial Services. Gift Processing will reconcile the ASI STUDENT CLUB DONORS FUND, taking into account any fees not yet posted. Gift Processing will then prepare a disbursement voucher with the details of the transfer. The disbursement voucher will be processed through Accounts Payable. The CSV file will be emailed to ASI Financial Services.

## 5. Transmitting Donation Transaction to ASI
On a weekly basis, the Gift Processing Office will prepare a CSV file reconciled with the ASI
donation deposits made that week. The CSV file will be provided to the ASI Financial Services via email. The ASI Financial Services will return cash receipts to the Gift Processing office showing the funds were deposited into the designated student club fund in ASI.

Notification: contact clubs

### Procedure for Gifts-in-Kind

<table>
<thead>
<tr>
<th>Responsible Party:</th>
<th>Action:</th>
</tr>
</thead>
</table>
| Donor              | 1. **Receiving a Gift-in-Kind**  
The Donor is required to determine the value of the gift-in-kind, indication of ownership and their intent to donate. Donations of personal services cannot be accepted as a gift-in-kind for charitable deduction purposes. An appraisal will be required for gifts with a value of $5,000 or greater. |
| Student Club/ASI   | 2. **Acceptance of the Gift-in-Kind**  
The student club completes the Gift-in-Kind form and obtains donor signature. An email from the donor with description, value of gift and intent to give is sufficient in lieu of actual signature. |
| Student Club/ ASI  | 3. **Acquiring Signatures for the Gift-in-Kind**  
The Student Club or ASI Office forwards the Gift-in-Kind form to the Director of ASI or Faculty/Staff Advisor confirming receipt of the gift on behalf of the student club. |
| ASI                | 4. **Notification to Gift Processing of Gift-in-Kind**  
The “Gift-in-Kind Form” form with backup supporting donor’s declared value and if necessary IRS form 8283 is forwarded to the Gift Processing for review and corrections, if necessary. |
| ASI                | 5. **Processing the Gift Record and Acknowledgement**  
Gift Processing completes the gift record in the University Advancement database, will generate the charitable tax receipt and send the receipt to the donor. |
| Gift Processing    | 6. **Archiving Gift Documentation**  
Gift Processing files and maintains all gift records. |
| Gift Processing/ASI| 7. **Reviewing Gift Restrictions**  
Gift Processing notifies ASI of any restrictions imposed on the gift. ASI is responsible for notifying the student club of any such restrictions. |
| ASI/Gift Processing| 8. **Scans of Gift Records for ASI**  
ASI can access their gift records in the OnBase imaging system |
## STUDENT CLUB FUNDRAISING INFOGRAPHIC

<table>
<thead>
<tr>
<th>Non Charitable Cash Gifts</th>
<th>Charitable Cash Gifts</th>
<th>Charitable In Kind Gifts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Definition</strong></td>
<td><strong>Definition</strong></td>
<td><strong>Definition</strong></td>
</tr>
<tr>
<td>When a friend, family member, business or other supporter gives your club money in exchange of goods or services</td>
<td>When a friend, family member, business or other supporter gives your club money and you give nothing in return</td>
<td>Rather than giving you money to buy needed goods and services, a friend, family member, business or other supporter gives your club the goods and services you need</td>
</tr>
<tr>
<td>Examples include a bake sale, car wash, sponsorship for an ad</td>
<td>Examples include a cash or check donation with no exchange of goods or services, profit-sharing with a restaurant</td>
<td>Example include gift cards, supplies, furniture. Equipment and some services</td>
</tr>
<tr>
<td><strong>Solicitation</strong></td>
<td><strong>Solicitation</strong></td>
<td><strong>Solicitation</strong></td>
</tr>
<tr>
<td>No standard introduction letter needed</td>
<td>Use the standard introduction letter for charitable donation, if needed, or</td>
<td>Use the standard introduction letter for charitable donation, if needed, or</td>
</tr>
<tr>
<td>Send a standard thank-you letter after receiving a gift</td>
<td>Customize solicitation materials but obtain approval from Gift Processing at (909)869-2914 or <a href="mailto:gifts@cpp.edu">gifts@cpp.edu</a></td>
<td>Customize solicitation materials but obtain approval from Gift Processing at (909)869-2914 or <a href="mailto:gifts@cpp.edu">gifts@cpp.edu</a></td>
</tr>
<tr>
<td></td>
<td>Send a standard thank-you letter after receiving a gift</td>
<td>Send a standard thank-you letter after receiving a gift</td>
</tr>
<tr>
<td><strong>Mail To</strong></td>
<td><strong>Mail To</strong></td>
<td><strong>Mail To</strong></td>
</tr>
<tr>
<td>Non-charitable &amp; charitable gifts: Make payments out to: Associated Students, Inc (or ASI) with club name in memo</td>
<td>Mail payments to: Cal Poly Pomona Gift Processing PO Box 3121 Pomona, CA 91769</td>
<td>Make payment out to Cal Poly Pomona Philanthropic Foundation PO Box 3121 Pomona, CA 91769</td>
</tr>
<tr>
<td>Use ASI W-9 &amp; EIN</td>
<td>Use ASI W-9 &amp; EIN</td>
<td>Use Philanthropic Foundation’s W-9</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

Updated on: 12/13/2019

---

## STUDENT CLUB FUNDRAISING INFOGRAPHIC

<table>
<thead>
<tr>
<th>Non Charitable Cash Gifts</th>
<th>Charitable Cash Gifts</th>
<th>Charitable In Kind Gifts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tax Receipt</strong></td>
<td><strong>Tax Receipt</strong></td>
<td><strong>Tax Receipt</strong></td>
</tr>
<tr>
<td>No tax receipt</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes Student club fills out the &quot;Non-Cash Donation/Gift-in-Kind&quot; Form to request a tax receipt for the donor</td>
</tr>
<tr>
<td><strong>Deposit</strong></td>
<td><strong>Deposit</strong></td>
<td><strong>Deposit</strong></td>
</tr>
<tr>
<td>To be deposited to club’s agency account (account number 3XXXXX)</td>
<td>To be deposited to club’s Donation account (account number 5XXX00X)</td>
<td>To be deposited to a Philanthropic Foundation account</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not applicable</td>
</tr>
<tr>
<td><strong>Spending</strong></td>
<td><strong>Spending</strong></td>
<td><strong>Spending</strong></td>
</tr>
<tr>
<td>Submit a disbursement request (DR) to ASI Financial Service to spend funds out of the Agency account (3XXXXX)</td>
<td>Submit a disbursement request (DR) to ASI Financial Service to spend funds out of the Donation account (5XXX00X)</td>
<td>Work with the college liaison to access funds in the Philanthropic Foundation account</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

Updated on: 12/13/2019
**EXPENSES POLICIES & PROCEDURES**

**CASH ADVANCE**

Student clubs and organizations may submit a Cash Advance disbursement request up to $200 to an individual for an event. Cash Advances follow the same process as a Disbursement Request. *(Please note if the advance involves travel, refer to page 71)*

<table>
<thead>
<tr>
<th>Cash Advance D.R. Turned In:</th>
<th>Available for Mailing:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thursday by 5:00pm</td>
<td>Following Thursday</td>
</tr>
</tbody>
</table>

**Requesting a Cash Advance**

Submit a disbursement request to Financial Services requesting a Cash Advance.

A completed Cash Advance disbursement request includes *(Refer to page 32 for example of DR)*:

1. Your account name (club/organization name) and the account number.
   - If you do not know your account number, Financial Services can assist you.
2. Cash Advances will now be mailed so please allow an additional 5-7 business days to receive the check in the mail.
3. A detailed description of the purpose of the cash advance. Include how much funds are needed, the date of the event, and the items the cash advance check will be used for. Include supporting documents (i.e. quotes, product description and price from vendor’s website, etc.)
4. The approval of one authorized signer and the approval of your advisor.

**Returning a Cash Advance**

*Cash Advance receipts/back-up must be submitting via a Disbursement Request – Additional Information Form on OnBase. If the expenses exceeded the amount of the original cash advance, then a separate Disbursement Request will need to be submitted to reimburse the individual.*

A completed cash advance return contains:

1. Original, detailed receipts of all expenditures. Items purchased with cash advance must be listed on the receipts. Receipts must be visible in PDF or JPEG format
2. Accounting for all expenditures (ex: an Excel sheet)
3. Any cash advance excess (must be deposited into club account through cash/check).
4. Total receipts and any cash excess must equal original amount of cash advance.

The above documentation must be properly submitted within 10 days after the conclusion of the event/expense.

**Cash Advance Guidelines**

A. Cash Advances are for purchasing small items for an event. Multiple cash advances can be combined to pay for a large item. A separate disbursement request is used to request payment for large items.
B. Cash Advance disbursement requests, up to $200, may be submitted for an individual.
C. Only one Cash Advance check can be outstanding at a time per individual.
D. Original detailed receipts and accounting for all expenditures must be submitted along with any excess cash from the advance.
E. Supporting documentation must be submitted no later than 10 days after the event. If not submitted within the 10 days, the club/organization’s account is on hold for cash and travel advances and will not be released until the activity report envelope is properly returned to Financial Services.

F. No unauthorized purchases may be included in accounting of cash advance (personal items, side trips, etc.)

G. Repeated offenses may ban the organization from advances for the remainder of the year
DISBURSEMENT REQUEST (Preparer)
Refer to Procurement Policy Approved December 1, 2016 for full version

Schedule for Processing D.R.s with all Supporting Documentation:
ASI, IRA, Agency, and BSC Checks

<table>
<thead>
<tr>
<th>D.R. Turned In:</th>
<th>Available for Payment:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thursday by 5:00pm</td>
<td>Following Thursday after 2:00pm</td>
</tr>
</tbody>
</table>

A Disbursement Request (D.R.) is used to request a payment check. A D.R. is required to issue payment on a purchase order when the goods have been received or services have been rendered. The D.R. shall be completed in full through OnBase and approved by two authorized signers for the expense account to be charged. Supporting documentation for the expense shall be attached to the D.R. upon submission to OnBase.

D.R.s may also be used to request a check to be cut for a performer, vendor or artist prior to their performance. The D.R. shall be submitted along with the fully executed contract and any supporting documents (bank statements, proof of insurance, additional insured endorsement, etc.) to OnBase prior to the performance or date of service. The printed check will then be held by Financial Services or the department staff until the day of the event where it will be given to the vendor, performer, or artist after they have completed the contracted services.

**Starting PolyDoc**

1. **Ensure you are connected the Cal Poly Global VPN (Virtual Private Network)**

   ![Connected](image)
2. Go to the PolyDoc site the ASI – Disbursement Request Form link to create a request.

**OnBase Disbursement Request Link**

**Notices:** If using the ASI – Disbursement Request Form link you will need to use the link for each form that you create. If you are the Payee, then you may not prepare the form. You will need another authorized signer on the account to submit the form on your behalf.

3. Please use your regular CPP credentials to log in.

![Log in page](https://cpp.service-now.com/ehelp?id=kb_article&sys_id=c40f854e6fe8e600e020f35d5d3ee4d5)

4. Complete the Disbursement Request form.

![Disbursement Request Form](https://cpp.service-now.com/ehelp?id=kb_article&sys_id=c40f854e6fe8e600e020f35d5d3ee4d5)

5. Object Code Options:
8000 - General Expenses for Clubs
8211 - Supplies & Services - Program
8226 - Marketing & Public Relation
8279 - Student Scholarships
8288 - In-state travel
8289 - Out-of-State Travel

- **To attach any supporting documents** - scroll down to the Supporting Documents section. Select **Attach ASI – Disbursement Request Supporting Documents**. A Browse dialog box will appear. Select the supporting documents that you want to attach. Next click on **Save/Submit** to save the attached supporting documents.

6. Advisors, Universal Signers, and Financial Services may request additional information related to the submitted form (ex: additional proof of payment or proof of event). The preparer of the form will be emailed with a link to the Additional Information Form.
   a. The email will also list the Disbursement Request #: Please input this number into the box provided and click “Verify Disbursement Request #”
   b. The ASI notes for Requesting Additional Information will auto-populate. This will explain what further documentation is needed.
      i. Ex: “Please attach receipt for Amazon purchase that states ‘shipped’”
   c. Comments can be made to Financial Services in this box. This can be used to provide more context, give a budget line number, etc.
      i. Ex: Amazon receipt is attached.
   d. Please submit the requested additional information
   e. Save/Submit this form
A check or electronic form of payment will be issued to the person named on the request and will be issued via mail or direct deposit.

*The individual to whom the check is being made out to may not sign the same D.R. request.*

**The advisor may have a Universal signer sign in the Office of Student Life (OSL).**

**Limitations When Using Non-Agency Funds**

H. When purchasing meals during travel, there is a limit per meal on how much the advance can be used for:

- Breakfast $13
- Lunch $15
- Dinner $27

i. If travel is for a full day or more, allocations can be combined to reach a total meal limit of $55 per day of travel.
ii. If travel is for a duration beyond one meal time, allocations in the amount of the two meals can be combined to be used as the total meal limit for the day.

A. Food and non-alcoholic beverages to be consumed on campus must be purchased from food vendors on campus (BSC, Campus Marketplace, Kellogg West, etc.)

Filling in the Disbursement Request

A completed D.R. includes:

1. Travel Authorization number related to the D.R. (if applicable).
   a. D.R.s that involve travel are required to have the proper travel forms submitted to Financial Services at least two weeks prior to the event. A travel authorization number is assigned to the travel forms and given to the individual when submitting the forms. (*See page 48 for Travel Forms*)

2. Your account name (club/organization name) and the account number. Include the date the D.R. was created.
   a. If you do not know your account number, Financial Services can assist you.

3. Instructions on how to identify individual/company receiving the disbursement check.
   a. An address is required whether the check is to be mailed or picked up.
   b. Cal Poly Pomona’s 3801 address cannot be used but dorms and suites may be.

4. A detailed description of the purpose of the disbursement. Indicate whether travel was involved with the D.R.

5. Descriptions of each expenditure and their costs. Include the P.O. number (if applicable).
   Include the appropriate budget line item number for budgeted groups if withdrawing from non-Agency funds. Total the dollar amount of all expenditures, including sales tax.

6. The approval of one authorized signer and the approval of your advisor. Include the contact information of the preparer and the position/title of the approver.

Supporting Documentation

D.R.s must be submitted with all necessary supporting documentation in order to be processed.

Supporting Documentation Guidelines:

A. Detailed receipts must be attached and submitted along with D.R.s involving purchases with cash or card. Receipts should indicate if purchase was made with cash or card.
   ii. For online purchases, an order confirmation from the website being purchased from along with proof of payment must be attached to the D.R. when submitted.
   iii. For purchases on card, receipt must show the last four digits of the card used for the transaction along with the card holder’s name to match the name on the D.R.
      a. If the receipt does not show a name, then further documentation is needed in the form of either
         i. Bank/credit card statement showing the card holder’s name and the last four digits of the card used (must match provided receipts) or
         ii. Bank/credit card statement showing the card holder’s name and the transaction being reimbursed or
iii. Scan of the credit card used showing the card holder’s name and ONLY the last four digits of the card. All other numbers must be blacked out before submission.

b. Any other personal information may be blacked out before submission to Financial Services.

B. Emails are not sufficient supporting documentation unless approved by the AP Fund Specialist handling the account.

(See page 2 for ASI Financial Services Office and Contact Information)

C. For any differences between amounts on a D.R. and a supporting documentation, an explanation along with supported documentation of the reason (ex. balance was paid from two different accounts) is needed.

D. For any missing documentation, a formally typed and signed memo by the advisor must be written with a detailed explanation of what items were purchases, the dollar amount of purchase, and why the supporting document(s) was not turned in.

E. For any purchases that involve food (Ex: pizza for a club meeting), proof of the event is required (Ex: a list of attendees for a club meeting or flyer for a guest speaker event).

a. At the time the D.R. is turned in, this documentation must be attached.

If a disbursement request is for one or more of the following purposes, all required supporting documentation related to the purpose must be submitted.

Example: D.R. is for an event off campus that involves a meal(s)

Documentation:

- Travel forms submitted at least two weeks prior to event
- Event/Program flyer or proof of event
- Original line item receipt

<table>
<thead>
<tr>
<th>Disbursement is for a(n):</th>
<th>Supporting Documentation Needed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company</td>
<td>Completed invoice or Contract</td>
</tr>
<tr>
<td>Contractor / Performer /</td>
<td>1. Completed invoice \n2. Vendor Data Record (to be submitted via Docusign-Refer to Page 34)</td>
</tr>
<tr>
<td>Service Provided</td>
<td></td>
</tr>
<tr>
<td>(Agency/IRA account)</td>
<td></td>
</tr>
<tr>
<td>Contractor / Performer /</td>
<td>1. Completed invoice \n2. Vendor Data Record (to be submitted via Docusign) \n3. ASI Performance Contract (available on the ASI Financial Services website)</td>
</tr>
<tr>
<td>Service Provided</td>
<td></td>
</tr>
<tr>
<td>(ASI account)</td>
<td></td>
</tr>
<tr>
<td>Event</td>
<td>1. Program flyer/Proof of event</td>
</tr>
<tr>
<td>Meals</td>
<td>1. Original receipt(s) with detailed items purchased. \n2. Receipt(s) must state method of payment: \n   If purchased on card, receipt must show last four digits of card used or a bank statement with the transaction must be submitted \n3. List of participants</td>
</tr>
<tr>
<td>Shipped Goods</td>
<td>1. Signed invoices verifying that the items were received</td>
</tr>
<tr>
<td>Travel</td>
<td>1. All attendees from Cal Poly Pomona must have the proper travel forms filled in and submitted to Financial Services at least 2 weeks prior to the travel. (See page 48 for Travel Forms)</td>
</tr>
<tr>
<td>Purchased Items</td>
<td>1. Original receipt with detailed items purchased</td>
</tr>
</tbody>
</table>
If purchased on card, receipt must have last four digits of card used or a bank statement with the transaction must be provided

Supporting Documentation Guidelines (Cont.):
If a disbursement request is for one or more of the following purposes, all required supporting documentation related to the purpose must be submitted.
DISBURSEMENT REQUEST (Approver)

Starting PolyDoc

1. Ensure you are connected the Cal Poly Global VPN (Virtual Private Network)

   ![GlobalProtect Connected](image)

   Link to download: [https://cpp.service-now.com/ehelp?id=kb_article&sys_id=c40f854e6fe8e600e020f35d5d3ee4d5](https://cpp.service-now.com/ehelp?id=kb_article&sys_id=c40f854e6fe8e600e020f35d5d3ee4d5)

1. Go to the PolyDoc Workflow Reviewers Queue:


2. Please use your regular credentials to log in.

   ![PolyDoc Login](image)

Workflow – Reviewers Queue

38
2. Select a Disbursement Request form to view.

3. You can select a Disbursement Request form to view. Notice that you have Tasks:

![Task options: Review and Deny Request (Clubs)]

**Notice:** Approvers are notified daily that there are disbursement request forms in their queue. After three days, if left in the inbox, the DR will automatically route to the Office of Student Life for review.

- To view an attached Supporting Document(s), select a disbursement request form and scroll down to the Supporting Documents section. Select the **Attached Supporting Document Name** to view it.

![Attach Supporting Document(s)]

Or you can right click anywhere on the form and select Cross References.
A dialog box should appear with any supporting documents. Select one to view.

You can also add notes in the **Office Only Use** section. Once you have added any notes, click on **Save/Submit** to save the notes.

To attach any supporting documents, select a disbursement request form and scroll down to the Supporting Documents section. Select **Attach ASI – Disbursement Request Supporting Documents**. A Browse dialog box will appear. Select the supporting documents that you want to attach. Next click on **Save/Submit** to save the attached supporting documents.

**Review (Approve):** Selecting this allows you to approve the Disbursement Request. The Disbursement Request will exit this queue and move to the Finance queue. An Approved email is then sent to the preparer. If you make any changes to the form, you must click on **Save/Submit** to save the changes first.

**Request Additional Information:** Selecting this allows you to request supplemental information of the preparer. They will receive an email with instructions to attach this additional information. Please note, once they have submitted this information, you will still have to approve the request in order for it to be routed to Financial Services.
- **Deny:** Selecting this allows you to deny the disbursement request. You will have to add a reason(s) for denying the request in the Approver’s Comments section, which will be emailed to the preparer. If you forget to add a reason(s), the system will then ask you to type in a reason(s). The disbursement request form will then exit this queue and move to the messaging queue where a denied email with the reason(s) specified will be included and sent to the preparer at 6:00 pm. From there, the form will exit workflow.

**Retrieval – Reviewers**

- Notice: Reviewers can retrieve all forms submitted only for the account number(s) that they are authorized to approve.

To find ASI – Disbursement Request Forms, you can search by name, bronco #, date range, or use any of the keywords provided for the form.
1. To search select **Associated Students Inc** for the **Document Type Group**. Next click on the Document Type(s) you want to search for. To select more than one document type, you can select ctrl on your keyboard and click on more than document type.

2. Next, select a **Date Range**. Type in the Name. You can use any of the additional keywords to find the disbursement request form.

3. Next click on the Find button to search.

4. A list should appear based on the keywords that you used to search.
How to Enroll for Electronic Payments
ACH and Zelle

The ASI Vendor Direct Deposit form is used an “application” for payees to complete for an electronic payment via ACH or Zelle.

Filling out the Vendor Direct Deposit Form
Payees can submit the Vendor Direct Deposit Form on the ASI Financial Services website. These forms will be reviewed by an ASI representative, and processing time can take up to 2 weeks.

1. Navigate to the ASI Financial Services webpage
   a. Forms and Instructions > Vendors> Accessing Your Funds>Vendor Direct Deposit Form

2. Enter your full legal name and email address and then click “Begin Signing”

3. You will need to verify your identity; the access code will be sent to your email
   a. Enter the access code and click “Validate”

Figure 6 Disbursement Form
b. Read the Electronic Record and Signature Disclosure and click the checkbox and “Continue”

Please Review & Act on These Documents

CONTINUE OTHER ACTIONS +

4. Begin filling out all required information
   a. Select payment type
   b. **Note:** Zelle is only available for individuals. All businesses must select ACH.

   c. **Select Type of Action:** New, Change, or Cancellation
      i. New: this selection would be for payee’s applying for direct payment for the first time
      ii. Change: this selection would be for a change to a Vendor DD form that is currently active
      iii. Cancellation: this selection is to cancel a Vendor DD form that is currently active

   ![Vendor Direct Deposit Form]

   c. Enter payee information
      i. Payee legal name: must be full name as associated with banking institution
      ii. Address must be current

   ![Payee Information]

   d. Enter banking information
      i. If selecting Zelle, you will only be required to enter the phone number or email address associated with account
ii. If selecting ACH, you will be required to enter a phone number and email address for identity verification purposes.

iii. You will also need to enter your routing number and account number in which you would like to receive the funds.

5. If payee wants to opt out of direct payment, a cancellation form must be submitted
   a. Select which “payment type” you originally were enrolled in and fill highlighted boxes
   b. Select Cancel Direct Deposit
6. Review the form and ensure all information was inputted correctly and select the Authorization check box
7. Lastly, read through the Terms and Conditions
   a. Select the check box
   b. Type full name
   c. Type title (student, business owner, etc.)
   d. Select “Finish” at top right corner of form to submit
      i. Note: After the form is submitted, please allow 1-2 weeks for form to be processed
Lack of Itemized Receipt Form

A Lack of Itemized Receipt Form can be attached to the Disbursement Request in place of a missing receipt or receipt that is not itemized. Please note, this form must be completed in its entirety for the Disbursement Request to be processed. Proof of payment must still be attached to the Disbursement Request even if this form is used.

Filling in the Lack of Itemized Receipt Form

1. Complete the purchaser information. This should also be the vendor/payee on the Disbursement Request.
2. Fill in the vendor information, where the items were purchased (Ex: Target, Amazon, etc.)
3. Provide a *detailed* description of items purchased and list the price of all items. Be sure to include any tax/shipping costs.
4. Fill in the reason there is a lack of itemized receipt (Ex: vendor did not provide one, lost, etc.)
5. The purchaser must sign this form to ensure all information entered is correct.
6. The advisor must sign this form as their acknowledgement of all information being correct as well.
# Lack of Itemized Receipt

Associated Students, Inc.
Cal Poly Pomona

<table>
<thead>
<tr>
<th>Please complete and attach to submission documents.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Purchase Information:</strong></td>
</tr>
<tr>
<td><strong>Print Purchaser Name (First Name, Middle Initial, Last Name):</strong></td>
</tr>
<tr>
<td><strong>Phone Extension:</strong></td>
</tr>
<tr>
<td><strong>Vendor Name:</strong></td>
</tr>
<tr>
<td><strong>Purchase Dates:</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QTY</th>
<th>Description of Items Purchased</th>
<th>Unit Price</th>
<th>Extended Price</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tax</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Shipping</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

| Total    | $ 0.00 |

<table>
<thead>
<tr>
<th>Reason for lack of receipt [must be completed]:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purchaser Signature:</td>
</tr>
<tr>
<td>Date:</td>
</tr>
</tbody>
</table>

| Advisor/Supervisor Printed Name:               |
| Date:                                           |

| Advisor/Supervisor Signature:                  |
| Date:                                           |
VENDOR DATA RECORD

A Vendor Data Record is required when a club would like to pay a vendor directly out of their club account for a service provided (Ex: a photographer taking pictures for an event, DJ, performer, etc.). A D.R, vendor invoice and vendor data record are needed to complete this transaction.

Vendor Data Records are submitted electronically via Docusign. The link is available on our website, https://asi.cpp.edu/financial-services/. Once the vendor fills out the form and electronically signs it, the vendor data record is automatically submitted to Financial Services.

Filling in Vendor Data Record via Docusign
(Refer to page 35 for the Vendor Data Record Online Form)

1. First, vendors will need to select whether they are a business or sole proprietor. Depending on their choice, the correct boxes will be highlighted.
2. Next, vendors must fill out information such as name, address and phone number. For a business, they will need to put their business address.
3. Vendors will then either fill in Federal Tax ID (EIN) or their Social Security Number. Depending on whether they clicked “Business” or “Sole proprietor”, the correct option will be highlighted.
4. They will then insert correct information and sign the form electronically.
5. Once completed, the vendor will click, “Finish” so the form is automatically submitted to Financial Services.
VENDOR DATA RECORD

1. (Required if you're a business entity doing business with ASI Financial Services)
   PLEASE RETURN TO: ASI Financial Services
   3801 West Temple Ave, 304g, 35-2123, Attn: Accts Payable
   Pomona, CA 91768
   PHONE NUMBER: (909) 869-2810
   FAX NUMBER: (909) 869-6858

2. VENDOR'S BUSINESS NAME:
   Financial Services Photography
   VENDOR PHONE NUMBER:
   503-806-2000

3. MAILING ADDRESS (Number and Street, or P.O. Box Number):
   3831 W Temple Ave
   City, State, and Zip Code: Pomona, CA 91788

4. VENDOR ENTITY TYPE:
   LIMITED CORPORATION/PROFESSIONAL CORPORATION/MANAGEMENT COMPANY/PROFESSIONAL CORPORATION
   EMERGENCY RESPONSIBILITY/PROFESSIONAL CORPORATION
   ESTATE OR TRUST
   PARTNERSHIP
   ALL OTHER CORPORATIONS
   GENERAL PARTNERSHIP
   LLC (Enter appropriate box):
   Corporation
   Partnership
   NOTE:
   - Government entities
   - All employees

5. SOCIAL SECURITY NUMBER REQUIRED FOR INDIVIDUALS OR PROPRIETORS: 11-1-1-111
   VENDOR TAXPAYER ID NUMBER:

6. VENDOR RECORDED DECLARATION OF TAX STATUS:
   California State Tax Withholding Status (Applicable to All Vendors):
   California resident, paid to business in CA or have a permanent residence in CA
   California Nonresident (See page 2)
   A vendor from CA state withholding is attached (From the California Franchise Tax Board).
   All services related to this payment were performed OUTSIDE of the State of California

7. CERTIFYING SIGNATURE:
   DATE: 7/14/2010
   PHONE NUMBER: 503-806-2000

NOTE:
- Individuals are required to submit this form.
- Payments will not be processed without an accompanying taxpayer I.D. number.

Printed Name:
Employee Name:
Employee ID:
Employee Position:
Employee Contact Information:
Employee Address:
Employee Phone Number:
Employee Email Address:
Employee Social Security Number:
Employee Taxpayer ID Number:
Employee Tax Status:
Employee Certification:
Employee Signature:
Employee Date:
Employee Telephone Number:
Employee Email Address:
Employee Position:
Employee Department:
Employee Division:
Employee Supervisor:
Employee Supervisor Contact Information:
Employee Supervisor Address:
Employee Supervisor Phone Number:
Employee Supervisor Email Address:
Employee Supervisor Position:
Employee Supervisor Department:
Employee Supervisor Division:
Employee Supervisor Supervisor:
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Employee Supervisor Position:
Employee Supervisor Department:
Employee Supervisor Division:
Employee Supervisor Supervisor:
Employee Supervisor Contact Information:
Employee Supervisor Address:
Employee Supervisor Phone Number:
Employee Supervisor Email Address:
Employee Supervi
PRIZE AND AWARD FORMS

For any prize, award, or gift given out by a club or an organization, a Prize and Award Form must be completed. If items are purchased for use at a later time and the recipient(s) is not known at the time of purchase, the holder is required to keep a detailed log showing the recipient names, items that were given, the purpose, the date given, and the value. Turn in to Financial Services when items are disbursed.

Please note that there are two different forms depending on the value of the prize, whether it is $50 and under or more. For any prize over $50, a vendor data record must be filled out (Refer to page 34). It is important clubs take the responsibility to collect accurate information at the time the prize or award is given in case the recipient is unavailable at a later date.

**How to Filling in Prize and Award Forms ($50 & under)**
(Refer to page 37 for the $50 or under Prize and Award Form)

1. List first and last name of any recipients of prizes and awards valued at $50 or less.
2. Describe item that was purchased (Ex: Starbucks gift card, coffee mug)
3. State value of item. Please note any item over $50 will have to be listed on a separate form.
4. Provide date item was awarded.
5. Describe why item was awarded to the recipient (Ex: Fundraiser raffle prize, guest speaker gift).

**How to Filling in Prize and Award Forms (Over $50)**
(Refer to page 38 for the over $50 Prize and Award Form)

1. State the name of the club or organization awarding the prize or award and then the date it was given to the recipient on.
2. Next, describe the item and list the value. The value must be over $50 for this form.
3. Fill in the recipient personal information such as name, Bronco ID (if CPP Student), address and phone number. Then have the gift recipient sign and date the form.
4. Then, indicate whether the recipient is an ASI employee, Foundation/University employee or not affiliated*.

*Not affiliated individuals must fill out a Vendor Data Record form (Refer to page 34).
## Prize, Award & Gift Recipients

($50 or Less)

<table>
<thead>
<tr>
<th>Name</th>
<th>Prize Description</th>
<th>Prize Value</th>
<th>Date Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joe Smith</td>
<td>Coffee Mug</td>
<td>$5.00</td>
<td>9/15/20</td>
</tr>
<tr>
<td>Julie Doe</td>
<td>Hydroflask</td>
<td>$40.00</td>
<td>9/17/20</td>
</tr>
</tbody>
</table>

**For any prize, award, or gift of over $50, a Prize and Award Form must be completed. If items are purchased for use at a later time and the recipient(s) is not known at the time of purchase, the holder is required to keep a detailed log showing the recipient names, what was given, the purpose, the date given, and the value. Turn in to Financial Services when items are disbursed.**
## PRIZE, AWARD & GIFT FORM
(Over $50)

<table>
<thead>
<tr>
<th>Prize/Award Information:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AWARDED BY</strong></td>
<td>Sample Form Society</td>
</tr>
<tr>
<td><strong>ITEM DESCRIPTION</strong></td>
<td>iPad Mini</td>
</tr>
<tr>
<td><strong>VALUED AT $</strong></td>
<td>150.00</td>
</tr>
<tr>
<td><strong>ON</strong></td>
<td>9/15/2020</td>
</tr>
</tbody>
</table>

### Please Provide the Following Information:

| **RECIPIENT NAME:** | John Doe |
| **EMPLOYEE BRONCO ID:** | 011123456 |
| **ADDRESS:** | 123 Forth St. |
| **CITY/STATE/ZIP:** | Pomona, CA. 91768 |
| **EMAIL ADDRESS:** | jdoe@cpp.edu |
| **TELEPHONE NUMBER:** | (909)123-4567 |

| **RECIPIENT SIGNATURE:** | John Doe |
| **DATE** | 09/15/20 |

### Recipient Status (check at least one box below):

- [ ] ASI Employee*
- [ ] Foundation/University Employee*
- Not Affiliated**/Vendor Data Form Required

*If an employee of ASI, Foundation or University, this will be taxed and reported on your W-2 Form if the amount is over $50.

**If not an employee of ASI, Foundation or University, a 1099 will be issued if you receive $600 or more per calendar year.

Please be aware that prizes and awards are taxable. It is your responsibility to report it as income. Check with your tax advisor for further details.
PURCHASE ORDER REQUESTS (Preparer)

Refer to Procurement Policy Approved December 1, 2016 for full version

A purchase order (P.O.) is a legal binding contract between ASI and a vendor. P.O.s are widely accepted in the business community. It verifies that funds are encumbered (set aside) from an appropriate account to pay the vendor once the goods and/or services have been adequately provided.

While some vendors require P.O.s and some are willing to provide goods or services without a P.O., it is highly recommended that all clubs and organizations always utilize a P.O. for their fund accounts and encourage the vendor to accept it. This ensures that funds will be available to cover the vendor’s invoice. All P.O. Requests (P.O.Rs) are generally processed within 3 business days and handled as requested.

A P.O.R does not provide payment to the vendor. After the goods have been delivered or services have been rendered, a D.R. with an original invoice is to be submitted to OnBase for payment against the P.O. Payment will not be made without an original invoice. The only exception is when the services are rendered by either the ASI or the University. Payments will be automatically deducted from the account (See page 42 Automatic Payment Procedures).

Starting PolyDoc

2. Ensure you are connected the Cal Poly Global VPN (Virtual Private Network)

Link to download: https://cpp.service-now.com/ehelp?id=kb_article&sys_id=c40f854e6fe8e600e020f35d5d3ee4d5
1. Go to the PolyDoc site the ASI - Purchase Order Request Form link to create a request.

   OnBase Purchase Order Link

   **Notice:** You will need to use the link for each form that you create.

2. Please use your regular credentials to log in.

3. Complete the Disbursement Request form.

4. Object Code Options:

   8000 - General Expenses for Clubs
8211 - Supplies & Services - Program
8226 - Marketing & Public Relation
8279 - Student Scholarships
8288 - In-state travel
8289 - Out-of-State Travel

• **To attach any supporting documents** - scroll down to the Supporting Documents section. Select **Attach ASI – Disbursement Request Supporting Documents**. A Browse dialog box will appear. Select the supporting documents that you want to attach. Next click on **Save/Submit** to save the attached supporting documents.

**Notice:** Preparers are emailed immediately when a request is approved. If a form is denied by an advisor then a new form must be completed. The option to edit an existing form is not available.

**Purchase Order Request Guidelines**
A P.O.R is required for:
1. Purchases which cost $5,000 or more, not including tax, for the following funds:
   a. ASI
   b. Instructionally Related Activities (IRA)
   c. Bronco Student Center (BSC)
2. All purchases made from the University, Cal Poly Pomona Foundation, or Associated Students, Inc. (ex. room reservation, Conferences and Events, MDPR prints, etc.) for:
   a. ASI
   b. IRA
   c. BSC
   d. Agency Accounts

A P.O.R is necessary for all services rendered by the Associated Students Incorporated, University or Cal Poly Foundation, regardless of the amount. This includes services provided by ASI Conference & Events, MDPR, Public Safety, Graphics, Kellogg West, Bronco Bookstore, and other Foundation services. To ensure full coverage of University charges, an additional 5% should be added to all estimated charges.
A P.O.R is not required when a vendor, performer, or artist is contracted for their services. ASI’s Performance contracts represent a legal and binding agreement that can be offered to the vendor/performer/artist as a promise to pay. A P.O.R may still be used to encumber the funds to pay the contract.

**Filling in the Purchase Order Form**
*(Refer to page 41 for the Purchase Order form)*

**A completed P.O. request includes:**
1. The preparer’s name, organization’s name, preparer’s telephone number and/or extension, and preparer’s email address.
2. The vendor’s name, address, and telephone number. The date of the event, if applicable.
3. Instructions on how to transmit the completed P.O.
4. The account number from which the funds will be held.
   a. If you do not know your account number, Financial Services can assist you.
5. Justification for purchase/the appropriate budget line item number for budgeted groups.
6. The quantity and a detailed description of the items or services to be provided.
7. The total dollar amount of the P.O., including sales tax and other charges.
8. The approval of your student representative, the approval of your advisor, and an authorized signer’s email for contact.

**Supporting Documentation**
P.O.Rs must be submitted with all necessary supporting documentation in order to be processed.

A. A completed P.O.R will contain a quotation and estimates from the vendor which the goods are being purchased or a service is being provided.
   a. Please note there is a difference between a quotation and an invoice. If the document says “invoice”, a P.O. will not be necessary. Instead, a D.R. must be filled out *(Refer to Page 31).*
B. If the P.O is being used to purchase food, then an event flyer or list of anticipated attendees must be attached as well.

Once a P.O.R is turned into OnBase, allow 3 business days to process the official P.O. The actual P.O. may be sent to the vendor or returned to the originator.

After the goods have been delivered or services have been rendered, with the exception of automatic payments to the ASI and the University, an original invoice is to be submitted to Financial Services for payment against the P.O. Payment is not made without an invoice. The invoice must have an approved Disbursement Request (D.R.) attached referencing the Purchase Order number.

*(Refer to page 31 Disbursement Request for more information on supporting documentation)*
PURCHASE ORDER REQUESTS (Approver)

Starting PolyDoc

1. Ensure you are connected the Cal Poly Global VPN (Virtual Private Network)

   ![Linked image](GlobalProtect.png)

   **Link to download:** [https://cpp.service-now.com/ehelp?id=kb_article&sys_id=c40f854e6fe8e600e020f35d5d3ee4d5](https://cpp.service-now.com/ehelp?id=kb_article&sys_id=c40f854e6fe8e600e020f35d5d3ee4d5)

2. Go to the PolyDoc Workflow Reviewers Queue:


3. Please use your regular credentials to log in.
Workflow – Reviewers Queue

4. You can select a Purchase Order form to view.

5. Notice that you have Tasks:
Notice: Reviewers are notified daily that there are Purchase Order forms in their queue. After three days, if left in the inbox, the Purchase Order Request will automatically route to the Office of Student Life for review.

- To view an attached Supporting Document(s), select a Purchase Order form and scroll down to the Supporting Documents section. Select the **Attached Supporting Document Name** to view it.

Or you can right click anywhere on the form and select Cross References.

- A dialog box should appear with any supporting documents. Select one to view.

- You can also add notes in the **Office Only Use** section. Once you have added any notes, click on **Save/Submit** to save the notes.

- To attach any supporting documents, select a Purchase Order form and scroll down to the Supporting Documents section. Select **Attach ASI - Purchase Order Supporting Documents**. A Browse dialog
box will appear. Select the supporting documents that you want to attach. Next click on Save/Submit to save the attached supporting documents.

- **Review (Approve):** Selecting this allows you to approve the Purchase Order. The Purchase Order will exit this queue and move to the Finance queue. An Approved email is then sent to the preparer. If you make any changes to the form, you must click on Save/Submit to save the changes first.

- **Request Additional Information:** Selecting this allows you to request supplemental information of the preparer. They will receive an email with instructions to attach this additional information. Please note, once they have submitted this information, you will still have to approve the request in order for it to be routed to Financial Services.

- **Deny:** Selecting this allows you to deny the Purchase Order. You will have to add a reason(s) for denying the request in the Approver’s Comments section, which will be emailed to the preparer. If you forget to add a reason(s), the system will then ask you to type in a reason(s). The Purchase Order form will then exit this queue and move to the messaging queue where a denied email with the reason(s) specified will be included and sent to the preparer at 6:00 pm. From there, the form will exit workflow.

**Retrieval – Reviewers**

- **Notice:** Reviewers can retrieve all forms submitted only for the account number(s) that they are authorized to approve.

To find ASI – Disbursement Request Forms, you can search by name, bronco #, date range, or use any of the keywords provided for the form.
1. To search select **Associated Students Inc** for the **Document Type Group**. Next click on the Document Type(s) you want to search for. To select more than one document type, you can select ctrl on your keyboard and click on more than document type.

2. Next, select a **Date Range**. Type in the Name. You can use any of the additional keywords to find the disbursement request form.

3. Next click on the Find button to search.

4. A list should appear based on the keywords that you used to search.
AUTOMATIC PAYMENT PROCEDURES

Purpose
The Automatic Payment Procedures outlined in this document are intended to provide guidance on the business processes established to help streamline transactions conducted with the Cal Poly Pomona University and ASI Bronco Student Center. The implementation of these new procedures is expected to improve efficiency, reduce lag time in payment processing, reduce the time and cost spent on collection, and increase collection rate.

Payments to ASI (ASI Accounts Receivable)

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Customer</th>
<th>Products, Programs, Services</th>
<th>Billing Agent</th>
<th>Payment Agent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conference &amp; Events (C&amp;E)</td>
<td>Student Clubs &amp; Organizations, Instructionally Related Activities (IRA), and University Departments</td>
<td>BSC Conference Room Rental Marketing Design &amp; Printing Services Marketing supplies (stakes &amp; sleeves) etc.</td>
<td>ASI Accounts Receivable Louisa Keyes, Accounts Receivable Vault Cashier, x2846</td>
<td>ASI Accounts Payable for Student Clubs &amp; Organizations and IRAs Associate Director for Revenue Management, x6859</td>
</tr>
<tr>
<td>Janet Castro, x4452</td>
<td></td>
<td></td>
<td></td>
<td>University Accounts Payable for University Departments Amanda Velasquez, x6895</td>
</tr>
<tr>
<td>Marketing Design &amp; Public Relations (MDPR), etc.</td>
<td>Cathy Neale, x3473</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Service Provider’s Responsibilities
- Require all student clubs, student organizations, and IRAs to obtain a purchase order (PO) from ASI to encumber their funds; PO must be signed by the authorized account signer and the email of the authorized signer must be provided;
- Require all University departments to provide the chart field string;
- If the final billing amount of the order exceeds the PO amount, the service provider must request the customer to complete a Disbursement Request;
• Upon implementation of the procedures, notify all customers during the initial transition that their accounts will be automatically deducted;
• If a contract is required, the contract must also be signed by the authorized account signer;
• Provide a summary list of charges detailing the customer’s name, account number/chart field string, PO# if applicable, products/services rendered, date of service, and the final billing amount;
• If a summary list of charges is not available, supporting document that contains the same information listed above is also acceptable.

Customer’s Responsibilities
• Student clubs & organizations, as well as IRAs, are required to submit an ASI P.O. to the service provider when a cost would be involved.
• If the PO amount is less than the final billing amount, the customer must notify ASI Financial Services to increase the PO amount;
• University departments are required to provide a chart field string to the service provider;
• Authorized signer needs to review the final invoice sent via email;
• The final bill will be deducted from the customer’s account automatically;
• If the customer disagrees with the charge, the customer needs to contact the billing agent, or ASI Accounts Receivable, within 3 days to make a correction.
Scholarship Award

ASI Fund (account number starting with a “1”) cannot be used to fund scholarships unless the scholarship is part of the scholarship agreement for ASI Student Government. Clubs and organizations, however, can choose to award scholarships out of their Agency accounts (account number starting with a “3”).

In order to give out a scholarship award, the Scholarship Award Form must be prepared. In addition, the Scholarship Award Form must be attached to a Disbursement Request that’s payable to Cal Poly Pomona University.

Financial Services will process the scholarship disbursement. Due to IRS tax reporting requirements, scholarship disbursements cannot be paid directly to the students. They must go through the Office of Financial Aid & Scholarships and be deposited directly into students’ financial aid accounts.

How to Filling in the Scholarship Award Form
(Refer to page 57-59 for the Scholarship Award Form)

A completed Scholarship Award Form includes:
1. Scholarship recipient’s first name, last name, and Bronco ID number.
2. Account number, name of the club/organization, the name of your scholarship, the academic year the scholarship is awarded, the amount of the scholarship award for the first recipient, the total amount of scholarship for all recipients
3. Check the academic quarter that the scholarship will be disbursed. It is okay to back-award to a previous quarter or the award can be input for the next quarter.
4. A student has to have at least 1 unit to receive a scholarship for the quarter awarded. If a student is not attending Cal Poly Pomona (i.e. has 0 units), then Office of Financial Aid & Scholarships cannot process the scholarship award for that student.
5. An authorized student signer must sign the form.
6. The club advisor must also sign the form.
7. If the scholarship is going to more than one recipient, then attach the second page.
8. Complete the Disbursement Request (refer to page 31 for detailed explanation of the D.R.), making sure that the payee is Cal Poly Pomona University.
SCHOLARSHIP AWARD FORM
ASI AGENCY ACCOUNT

Cal Poly Pomona
Office of Financial Aid & Scholarships

List the first recipient here. If you have additional recipients for the same account/project number, use the second page "Scholarship Award Form Foundation Account (con’t.)" for the rest of the recipients.

<table>
<thead>
<tr>
<th>Student's First Name</th>
<th>Student's Last Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joe</td>
<td>Doe</td>
</tr>
</tbody>
</table>

011234567

Bronco Number

Account / Project Number: 3S0123
Name of Organization: Sample Form Society
Scholarship Name: Form Design Scholarship
Award Year: 2019-2020
Amount to Award: $200.00
Total Amount to be billed to this Account/Project Number: 600.00

Quarter(s) to Disburse:

1 Fall 2 Winter 3 Spring 4 Summer

Minimum number of units required for student to receive this award (Must be greater than 0)

Jane Rodriguez x1234

Name of Person Preparing Form (please print) Extension #
An Khanphenh

Account Authorized Signature (Student) Date (mm/dd/yy)

Authorised Account Signature (Advisor) Date (mm/dd/yy)

If the second page is being used, please sign the second page as well.

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. It is, also, in compliance with the University Related Project Agreement.

Revised : 12/23/2015
SCHOLARSHIP AWARD FORM ASI AGENCY ACCOUNT (con't)

If you have more than one student for the same account / project number, add the additional students here.

Account / Project Number: 350123

<table>
<thead>
<tr>
<th>Bronco #</th>
<th>Student Name</th>
<th>Scholarship Name</th>
<th>Amount</th>
<th>Quarter (F/W/Sp/Su)</th>
</tr>
</thead>
<tbody>
<tr>
<td>011234567</td>
<td>Joe Doe</td>
<td>Form Design Scholarship</td>
<td>$200</td>
<td>Fall</td>
</tr>
</tbody>
</table>

TOTAL for both pages

An Khamphanh
Account Authorized Signature (Student)
10/24/2020

SF Advisor 1
Account Authorized Signature (Advisor)
10/24/2020

Revised: 12/23/2015
TRAVEL

[CSU Travel Procedures] [ASI Travel Policy] [Safer Return Travel Policy] All documents related to travel must be submitted to ASI Financial Services in accordance with the ASI Travel Policy & Procedures. Non-compliance may result in the inability to reimburse all travel related costs.

a. International travel must be approved by the University prior to any travel taking place. This process may take up to three (3) months. This requirement is in addition to the above stipulation regarding ASI travel forms.

Competitive Sports
ASI funded groups participating in close contact competition and activities shall be required to submit a list of participants and signed waiver and liability release forms [Executive Order 1041] from each participant as well as comply with other requirements to manage the risks involved. These forms must be submitted prior to the activity (Senate Bill 92-93:06).

*indicates items that may be funded by the Agency or Donation account

Any student club/organization that plans to reimburse or pay for travel expenses must have each attendee affiliated Cal Poly Pomona fill out an Authorization to Travel Form, Estimated Travel Expense, and a Liability Release Form.

Effective December 15, 2016 all completed travel forms must be submitted to ASI Financial Services at least 10 business days prior to the event. Submissions between 1-9 days prior to the event will require a memo from the club or organization’s advisor/supervisor justifying the late submission. Disbursement Requests for travel and expenses related to the travel will not be processed if completed travel forms are not submitted prior to travel.

Effective June 1, 2021, essential out-of-state travel may be allowed if approved by the Dean of students for clubs and organizations or approved by the Provost for IRA groups. ASI Financial Services must receive this form (signed and approved by the advisor) at least 10 business days prior to travel, so please plan accordingly. Please note this policy is subject to change and may be revoked at any time in relation to state and county guidelines.

Travel Forms
EVERY ATTENDEE FROM CAL POLY POMONA MUST FILL OUT EACH FORM

How to

Request for Authorization to Travel Form
(Group & Individual)*

(Refer to page 49 for the Request for Authorization to Travel form for group travel)
(Refer to page 50 for the Request for Authorization to Travel form for individual travel)
1. Give the name of the event, the location being traveled to, and the date(s) of the travel.
2. Account number (Agency, ASI, IRA, BSC) to be charged.
3. Total trip estimate is the cost of the entire event including the cost of each attendee(s) for travel, meals, etc.
4. Provide a detailed description and purpose for the travel.
5. Provide justification as to why this travel is considered essential.
6. Hover over “25Live” to submit the Event Registration form
7. The requestor of the form, or organizer of the travel must list their name and contact information.
8. An advisor/supervisor and ASI Executive Director (for ASI staff only) must approve and sign the form.
9. This form must be emailed to asifs@cpp.edu for further processing.
10. A list of travelers must be attached to this form. Please use as many forms as needed to list all travelers, even if they are not seeking reimbursement.

**How to Fill in the Estimated Travel Expenses***
(Refer to page 51 for the Estimated Travel Expenses form)
1. Each club/group expecting a reimbursement must fill out a form.
2. If airfare is involved, include the Airline Carrier and an estimated total.
3. If lodging is involved, include the confirmation # of the booking, if available.
4. Include any conference/seminar fees that were incurred.
5. Include any other expenses not covered in previous sections.
6. If transportation is involved, indicate which modes of transportation will be used or for personal cars, any mileage to be covered.
7. If a traveler is requesting a travel advance, include any meals and incidentals and total the amount being requested. Signature of the traveler requesting the travel advance is needed.

**How to Fill in the Release of Liability***
(Refer to page 52-53 for the Release of Liability form)
1. Give the name of the event, the location being traveled to, and the date(s) of the travel.
2. Each traveler from Cal Poly Pomona must sign, print, and date their form.

*All travel forms are available on the ASI website under Financial Services and must be signed and turned in all together to Financial Services to receive a Travel Authorization number to be used when filling in a disbursement request. Please note all signatures must be original (no electronic signatures will be accepted).
Financial Services
Request for Authorization to Travel Form

Name & Location of Conference/Seminar/Event, etc.:

Date (dates) of travel:
Account code to be charged:
Total trip estimate: $ 
Purpose:

Justification of Essential Travel:

Completed 25Live Event Reservation Requirement (Clubs Only) Yes No
Requested by:

Student
Name
Phone
Email

Approval By:
Adviser

OFFICE USE ONLY:
OSLCC
Dean of Students

Date
Date
Date
### List of Travelers

<table>
<thead>
<tr>
<th>Traveler Name</th>
<th>Student/Staff/Faculty</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Request for Authorization to Travel Form

Prospective Traveler: Bob Butler

Name & Location of Conference/Seminar/Event, etc.: Sample Form Convention, Sample Forms Hall in Sample, CA

Date (dates) away from office: 10/7/20-10/9/20

Account code to be charged: 3S0123

Total trip estimate: $300

Justification:
Sample Forms Convention to learn new types of sample forms and how to implement sample forms into different corporations

Traveler’s Signature: Bob Butler

Email: BBButler@cpp.edu

Approval By:

Advisor / Supervisor: SF-Adv

ASI Leadership Team: Yes □ No □ (For ASI Staff Prof. Development Only)

ASI Executive Director: (For All ASI Staff Travel Only)

If not approved, please indicate why not:

Original: Financial Services
Copy: Traveler

Date: 08/24/2020

Figure 7 Request for Authorization to Travel Form
## ASSOCIATED STUDENTS INC.

### ESTIMATED TRAVEL EXPENSES

**Traveler’s Name:** Sample Form Society

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Airfare</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Check payable to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Airline Carrier:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total:</td>
<td>$</td>
</tr>
<tr>
<td>3</td>
<td>Lodging</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Check payable to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Confirmation #:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dates Staying:</td>
<td>10/7/20-10/9/20</td>
</tr>
<tr>
<td></td>
<td>Total:</td>
<td>$ 500.00</td>
</tr>
<tr>
<td>5</td>
<td>Fee for Conference / Seminar:</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Check payable to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total:</td>
<td>$ 200.00</td>
</tr>
<tr>
<td>7</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Check payable to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total:</td>
<td>$</td>
</tr>
<tr>
<td>9</td>
<td>Other Transportation</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Check payable to:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total:</td>
<td>$ 50.00</td>
</tr>
</tbody>
</table>

### Other Information:
- **Use of personal car:**
  - \( \text{miles} \times 0.575 \)
  - (Employee or authorized volunteer must submit proof of personal automobile liability insurance with coverage and limits that meet California’s minimum requirements).

### Cash Advance to ASI Traveler:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meals</td>
<td>$</td>
</tr>
<tr>
<td>Incidentals (tips, phone calls, etc.)</td>
<td>$</td>
</tr>
<tr>
<td><strong>Total cash advance to traveler</strong></td>
<td>$</td>
</tr>
</tbody>
</table>

**Signature of Traveler:**

**Date:**

---

### Figure 8 Estimated Travel Expense
RELEASE OF LIABILITY, PROMISE NOT TO SUE, ASSUMPTION OF RISK AND AGREEMENT TO PAY CLAIMS

Activity: Sample Form Society Convention

Activity Date(s) and Time(s): 10/7/2020-10/9/2020

Activity Location(s): Sample, CA

In consideration for being allowed to participate in this Activity, on behalf of myself and my next of kin, heirs and representatives, I release from all liability and promise not to sue the State of California; the Trustees of The California State University; Cal Poly Pomona; and their employees, officers, directors, volunteers and agents (collectively “University”) and Cal Poly Pomona Foundation, Inc.; Cal Poly Pomona Associated Students Inc.; and their employees, officers, directors, volunteers and agents (collectively “Auxiliaries”) from any and all claims, including claims of the University’s and/or Auxiliaries’ negligence, resulting in any physical or psychological injury (including paralysis and death), illness, damages, or economic or emotional loss I may suffer because of my participation in this Activity, including travel to, from and during the Activity.

I am voluntarily participating in this Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement; temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other’s actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s). Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this Activity, including travel to, from and during the Activity.

I agree to hold the University and/or Auxiliaries harmless from any and all claims, including attorney’s fees or damage to my personal property that may occur as a result of my participation in this Activity, including travel to, from and during the Activity. If the University and/or Auxiliaries incur any of these types of expenses, I agree to reimburse the University and/or Auxiliaries. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older. I understand the legal consequences of signing this document, including (a) releasing the University and/or Auxiliaries from all liability, (b) promising not to sue the University and/or Auxiliaries, (c) and assuming all risks of participating in this Activity, including travel to, from and during the Activity.

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I understand and agree that while participating in this activity, I remain subject to the rules, regulations, and policies of the activity and Cal Poly Pomona University, as stated in Title 5 of the California Code of Regulations, Section 41301, Standards for Student Conduct.

I have read this document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

Participant Signature: Bob Butler

Participant Name (print): Bob Butler Date: 08/24/2020
If Participant is under 18 years of age:

I am the parent or legal guardian of the Participant. I understand the legal consequences of signing this document, including (a) releasing the University and/or Auxiliaries from all liability on my and the Participant’s behalf, (b) promising not to sue on my and the Participant’s behalf, (c) and assuming all risks of the Participant’s participation in this Activity, including travel to, from and during the Activity. I allow Participant to participate in this Activity. I understand that I am responsible for the obligations and acts of Participant as described in this document. I agree to be bound by the terms of this document.

I have read this two-page document, and I am signing it freely. No other representations concerning the legal effect of this document have been made to me.

__________________________
Signature of Minor Participant’s Parent/Guardian

__________________________                         _________________
Name of Minor Participant’s Parent/Guardian (print)          Date

__________________________
Minor Participant’s Name

Revised 06/2011
International Travel

Student organizations traveling outside of the United States are required to complete an International Travel Package as listed below. Required forms and documentations will need to be reviewed and approved by the appropriate departments and staff. All travelers are also required to complete and have approved travel forms and purchase risk management insurance. This can be a long process and will need to be all completed and turned in to Financial Services no later than 3 months prior to departure.

Effective June 1, 2021, essential travel may be allowed if approved by the Associate VP/Dean of students for clubs and organizations or approved by the respective college Dean for IRA groups. Next, the form must be approved by VP of Student Affairs for clubs and organizations or approved by the Provost/VP for Academic Affairs for IRA groups. ASI Financial Services must receive this form (signed and approved) at least 10 business days prior to travel, so please plan accordingly.

Please note this policy is subject to change and may be revoked at any time in relation to state and county guidelines.

International Travel Package Checklist:
1. Authorization to Travel Form (per group)
2. Release of Liability Form (per traveler)
3. Authorization for International Travel (one per group)
4. List of Attendees
5. Emergency Contact List
6. Flight and Hotel Information
7. Risk Management Insurance
8. Document Confirming Purpose of Trip
9. Copy of Advisor’s Authorization to Travel on State Business (if Advisor is traveling)

Approval Process:
1. Review by ASI Executive Director – Account Status in ASI Financial Services
2. Review by Associate Vice President/Dean of Students – Registration/Good Standing
3. Review by Vice President/Student Affairs – Registration/Good Standing
4. Required Approval and Purchase of Insurance by Risk Management
Filling in the International Travel Form

(Refer to page 56 for Authorization for International Travel form)

The approval process for the Authorization for International Travel form may take several days or even a few weeks. Despite so, the forms and package needs to be completed and fully approved and submitted to ASI Financial Services 3 months prior to departure. Several specific signatures are needed and cannot be substituted with a Universal Signer so plan accordingly!

1. The name of the traveling organization and a primary contact information. The email provided must be checked daily and often throughout the entirety of the trip.
2. Provide a purpose for the travel.
3. Estimate the travel expenses to be incurred and indicate which account(s) the funds will be taken out from.
4. The location where the organization is traveling to. The more specific, the better.
5. Check each of the three links provided and indicate if the country/region that your group is traveling to is listed on any of the high risk countries lists.
6. Provide detailed information about the organization’s flight and lodging accommodations.
7. The name and signature of the student requesting the authorization and the name and signature of an advisor. A Universal Signature cannot be used and will not be accepted.
8. Submit the filled in Authorization for International Travel form to Financial Services to be reviewed. Once the form has been reviewed and approved, the organization will be contacted to pick up the signed form. Then the form is to be submitted to the Associate Vice President for further review and approval.
9. Student travelers are required to have approval and purchase of insurance by Risk Management.
   For more information visit the Cal Poly Pomona website under University Risk Management [https://www.cpp.edu/~rms/risk-insurance/insurance/index.shtml](https://www.cpp.edu/~rms/risk-insurance/insurance/index.shtml)
10. Provide a list of emergency contacts for each traveler. Include a telephone number and email that the contact can be reached at.
AUTHORIZATION FOR INTERNATIONAL TRAVEL

THIS FORM MUST BE SUBMITTED AT LEAST 30 DAYS IN ADVANCE OF DEPARTURE DATE.

In compliance with CSU Executive Order 1041, we hereby request authority for international travel to the destination(s), on the dates, and for the purpose indicated below:

REQUESTING ORGANIZATION: SAMPLE FORMS SOCIETY

TODAY'S DATE: 10/12/16

TELEPHONE CONTACT DURING DURATION OF TRIP: (626) 987-6543

EMAIL: JANERO@SAMPLE.COM

PURPOSE OF TRAVEL: TO ATTEND THE INTERNATIONAL CONVENTION OF SAMPLE FORMS AND EXPERIENCE DIFFERENT CULTURES OF SAMPLE FORMS TO GAIN THE KNOWLEDGE NEEDED TO CREATE NEW INNOVATIVE FORMS

FUNDING FOR TRAVEL: ESTIMATED TRAVEL EXPENSE: $3,500

SAMPLE FORMS SOCIETY

Account Name: S30123

Account Number: $2,000

SAMPLE FORMS SOCIETY

Account Name: 171234

Account Number: $1,500

LOCATION(S) AND DATES OF TRAVEL INCLUDE COUNTRIES AND CITIES/REGIONS OF TRAVEL:

SHIBUYA, TOKYO, JAPAN

2/13/16 - 2/17/16

Country and Cities/Regions

Departure and Return Dates

Country and Cities/Regions

Departure and Return Dates

INDICATE IF ANY OF THE LOCATIONS WHERE YOU WILL TRAVEL ARE ON THE FOLLOWING LIST:


☐ U.S. State Department Travel Warning List: http://travel.state.gov/content/passports/en/destinations-country-health.html

FLIGHT INFORMATION:

AMERICAN AIRLINES

2/13/16 5AM 2A345 2/17/16 5PM 6B789

Flight #

Airline Carrier

Departure Date / Time

Returning Date / Time

Flight #

lodging INFORMATION:

APA HOTEL

813-6416-7111

20-1 Maruyamacho, Shibuya, Tokyo 150-0044, Japan

2/13/16 - 2/17/16

Period of Stay

Lodging Facility

Phone Number

Address

Lodging Facility

Phone Number

Address

Period of Stay

REQUESTED BY:

STUDENT: JANE RODRIGUEZ

Print Name

Signature

Date

ADVISOR: JOHN PATEL

Print Name

Signature

Date

We understand and agree that when approvals for foreign travel are obtained, the travelers will purchase the CSURMA FTIP insurance coverage from University Risk Management. Please allow for two weeks prior to the departure date to purchase the insurance.

Page 1 of 3

Figure 10 Authorization for International Travel
REVIEWED BY:

ACCOUNT STATUS IN ASI FINANCIAL SERVICES:

ASI Executive Director Date $ Account Balance

REGISTRATION AND GOOD STANDING STATUS:

Associate Vice President / Dean of Students Date

Vice President for Division of Student Affairs Date

REQUIRED APPROVAL & PURCHASE OF INSURANCE:
RISK MANAGEMENT

University Risk Manager Date

ADDITIONAL APPROVAL REQUIRED (Mark N/A if not needed):
For Travel to Countries on the High Hazardous, War Risk, and/or U.S. State Department Warning List

University President Date

CHECKLIST-REQUIRED ATTACHMENTS:

For All International Travel Requests:

☐ Estimated Travel Expense Form
☐ Financial Report Showing Available Balance
☐ List of Travelers and Emergency Contact Information
☐ Trip Documentation (Conference Brochure)
☐ Release of Liability, Promise Not to Sue, Assumption of Risk and Agreement to Pay
Claims Form (If minor, under 18 years, must be signed by parent/guardian)

For All High-Hazard and War-Risk Destinations:

☐ List of accompanying University employees names, titles and contact information (email and phone)
☐ Written explanation if there is no accompanying University employee
☐ Memo from Area/Division Vice President in support of travel
<table>
<thead>
<tr>
<th>NAME OF STUDENT TRAVELER</th>
<th>18 YEARS OR OVER (Y/N)</th>
<th>EMAIL ADDRESS (you will check when traveling)</th>
<th>EMERGENCY CONTACT NAME</th>
<th>RELATION TO TRAVELER</th>
<th>EMERGENCY CONTACT’S EMAIL AND/OR PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>JANE RODRIGUEZ</td>
<td>Y</td>
<td><a href="mailto:JANERO@SAMPLE.COM">JANERO@SAMPLE.COM</a></td>
<td>MAX OSTROWSKI</td>
<td>UNCLE</td>
<td>(818) 123 - 456</td>
</tr>
<tr>
<td>AN KHAMPANH</td>
<td>Y</td>
<td><a href="mailto:ANKHAM@SAMPLE.COM">ANKHAM@SAMPLE.COM</a></td>
<td>ANNA KHAMPANH</td>
<td>MOTHER</td>
<td>(909) 987 - 6543</td>
</tr>
<tr>
<td>BOB BUTLER</td>
<td>Y</td>
<td><a href="mailto:BOBBYB@SAMPLE.COM">BOBBYB@SAMPLE.COM</a></td>
<td>AMANDA DIAZ</td>
<td>SISTER</td>
<td>(408) 121 - 2121</td>
</tr>
<tr>
<td>MIKE WIEMEYER</td>
<td>Y</td>
<td><a href="mailto:MIKEWHY@SAMPLE.COM">MIKEWHY@SAMPLE.COM</a></td>
<td>SARAH CHANG</td>
<td>SPOUSE</td>
<td>(626) 246 - 1357</td>
</tr>
</tbody>
</table>
Travel Expense Claim

Submission of the Travel Expense Claim form is required whenever travel expenses have been incurred and even if no reimbursement is due the traveler. Submission of the Travel Expense Claim form validates the travel expenses.

How to

Filling in the Travel Expense Claim

(Refer to page 60 for the Travel Expense Claim form)

1. Include your name (the person being reimbursed for travel or who the travel advance check was made out to), email and phone number, address, club name, account number, and travel authorization number which was assigned and given when the travel forms were submitted.
2. The date, location, and purpose of the travel should match the travel forms. Include any important financial remarks or details that came up during the travel.
3. List expenditures by date and by type. Original receipts must be attached.
4. When a personal vehicle was used and mileage reimbursement is being requested, include the miles driven. Attach a Google Map as the supporting document. The mileage reimbursement will automatically calculate using the current IRS standard. If a rental car was used, include original gas receipts and place the amount under “Misc.”.
5. Total for each line will be automatically calculated. If any payments were made directly from the account previously (direct bill), then put the amount in the “Less: Direct Bill” line. Put the amount of the travel advance received in the “Less: Travel Advance” line. If expenditures exceeded the amount of direct bill and travel advance, the “Claim Total” will be greater than zero. This is the amount of reimbursement that is due the traveler. A disbursement request (D.R.) for that amount will need to be submitted.
6. Sign to certify that the travel expense claim was verified and is accurate.
7. Obtain the signature of one authorized signer and the signature of the advisor.
<table>
<thead>
<tr>
<th>Date(s)</th>
<th>Location</th>
<th>Purpose of Trip, Remarks, and Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/15</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Description**

<table>
<thead>
<tr>
<th>Date</th>
<th>From</th>
<th>To</th>
<th>Airfare</th>
<th>Lodging</th>
<th>Meals</th>
<th>Incidental</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

**Date**

<table>
<thead>
<tr>
<th>Date</th>
<th>Date</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>10/15</td>
<td>10/15</td>
</tr>
</tbody>
</table>

**Claimant's Signature**

<table>
<thead>
<tr>
<th>Signature of Department Head (Staff Only)</th>
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</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Acknowledged by**

<table>
<thead>
<tr>
<th>Signature of Officer / Supervisor of Department</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Approved By**

<table>
<thead>
<tr>
<th>Signature of Department Head (Staff Only)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

**Figure 11 Travel Expense Claim**
TRAVEL ADVANCE

Refer to CSU Travel Procedures and Regulation G-001 (Effective January, 2016) for full version

Student clubs and organizations may submit a travel advance disbursement request for an event off campus. Travel Advances follow the same process as a disbursement request. Travel forms for each Cal Poly Pomona student attending the off-campus event must be filled out and submitted to Financial Services at least two weeks prior to the event, before the Travel Advance Disbursement Request can be processed. Travel Advance disbursements checks can only be picked up two weeks prior to travel date. Please plan accordingly when requesting a Travel Advance check.

**Travel Advance D.R. Turned In:**
Thursday by 5:00pm

**Check is Processed :**
Following Thursday after 2:00pm

**Requesting a Travel Advance**

1. Submit all necessary completed travel forms to Financial Services at least two weeks prior to the event. *(Refer to page 48 Travel Forms)*
   a. A travel authorization number will be assigned to the travel. Keep record of this number as it will be needed when filling in the travel expense claim form.
2. Submit a disbursement request to Financial Services requesting a travel advance.

A completed travel advance disbursement request includes:
*(Refer to page 31 Disbursement Request)*

1. Your account name (club/organization name) and the account number. Include the date the D.R. was created.
   a. If you do not know your account number, Financial Services can assist you.
2. Instructions on how to make out the disbursement check.
3. An address is required.
4. A detailed description of the purpose of the travel advance. Include how much funds are needed, the date of the event and the items the travel advance check will be used for.
5. The signature of one authorized student’s signer and the signature of your advisor. Include the contact information of the preparer and the position/title of the approver.

**Returning a Travel Advance**

*Travel Advance receipts/back-up must be submitting via a Disbursement Request – Additional Information Form on OnBase. If the expenses exceeded the amount of the original cash advance, then a separate Disbursement Request will need to be submitted to reimburse the individual.*

A completed cash advance return contains:

1. Original, detailed receipts of all expenditures. Items purchased with travel advance must be listed on the receipts. Receipts must be visible in PDF or JPEG format
2. Accounting for all expenditures (ex: an Excel sheet)
3. Any cash advance excess (must be deposited into club account through cash/check).
4. Total receipts and any cash excess must equal original amount of travel advance.

The above documentation must be properly submitted within 10 days after the conclusion of the travel.
Travel Advance Guidelines

A. Travel advances are for purchasing small items for an event. A separate disbursement request is used to request payment for large items.
B. Only one Travel Advance check can be outstanding at a time per individual.
C. Original detailed receipts and accounting for all expenditures must be submitted along with any unused funds from the advance.
D. Back-up documentation must be properly submitted with all supporting documentation no later than 10 days after the event. If not submitted within the 10 days, the club/organization’s account is on hold for Cash and Travel Advances and will not be released until the activity report envelope is properly returned to Financial Services.
E. No unauthorized purchases may be included in accounting of Travel Advance (personal items, side trips, etc.)
F. The person in charge must submit the Disbursement Request – Additional Information form after all expenditures have been made.
G. The person who the Travel Advance check is made out to must make all expenditures. If a purchase is made by credit card, the name on the bank statement must match up to the name on the Travel Advance check.
H. Repeated offenses may ban the organization from advances for the remainder of the year.

Limitations When Using Non-Agency Funds

B. When purchasing meals during travel, there is a limit per meal on how much the advance can be used for:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Meal</td>
<td>Limit</td>
</tr>
<tr>
<td>Breakfast</td>
<td>$13</td>
</tr>
<tr>
<td>Lunch</td>
<td>$15</td>
</tr>
<tr>
<td>Dinner</td>
<td>$27</td>
</tr>
</tbody>
</table>

i. If travel is for a full day or more, allocations can be combined to reach a total meal limit of $55 per day of travel.
ii. If travel is for a duration beyond one meal time, allocations in the amount of the two meals can be combined to be used as the total meal limit for the day.
LOST CHECK
Stop Payment & Replacement Check

If an accounts payable check (disbursement check) has been lost, never received, contains a misspelled name/address, or has not been cashed within the 90 day valid period, a stop payment and/or replacement check form would need to be filled out.

These forms can be submitted through email at asifs@cpp.edu

- A **Stop Payment Form** is filled out for AP checks that has not expired **within the 90 days**. This form is completed to stop payment on the check.
- A **Replacement Check Form** must be filled out in order to reissue and replace a check that may have been lost, never received, has a misspelled name/address, etc.

**When to Use Each Form**

- **Stop Payment Form and the Replacement Check Form**: To stop payment of the issued check and replace it with a new check.
- **Replacement Check Form**: Check is past the 90 day valid period and the customer will need it reissued and replaced.

**Filling in the Stop Payment Form Request**
(Refer to page 77 for Stop Payment Form Request)

1. The Account name (club/organization name) and the account number of payer.
2. Check Number, Date Issued, Amount and Payee information can be found on the check.
   a. If this information cannot obtained, Financial Services can assist you.
3. Reason for stopping check payment.
4. Name and Signature should be provided by the payee.

**Filling in the Request for Replacement Check**
(Refer to page 78 for Request for Replacement Check form)

1. Check Number, Amount, and who it is payable to are found on the check
   a. If this information cannot be obtained, Financial Services can assist you.
2. Check one of the options or provide an explanation for a replacement check.
3. Provide the name, address and contact information of the individual receiving the new check.
   a. State your relationship to the payee if you are not the payee.
STOP PAYMENT FORM REQUEST

1. 
   Name of Group/Club: Sample Form Society
   Account #: 3S0123

2. 
   Check Number: 012345
   Date Issued: 09/30/2020
   Amount: $100
   Payee: Jeff Kappa
   Check not received

3. 
   Reason for stop payment request:

4. 
   Name (print): Jeff Kappa
   Signature: Jeff Kappa
   Date: 10/31/2020

FINANCIAL SERVICES USE ONLY

Stop Date: 
Processed by: 
Approved: 
Date: 
ASI
REQUEST FOR REPLACEMENT CHECK

I (We) certify that the check number #0000001, in the amount of $100 payable to Bob Butler has been:

(Check One)

☐ Lost
☐ Stolen
☐ Destroyed
☐ Other (Describe below)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Note: Replacement Check will be reissued upon verification of Signature on file

Bob Butler
Name of Individual or Organization Officer

1234 S. Temple St.
Address
Pomona CA 91738
City (626)123-4567 Phone Number

Bob Butler
Signature 10/20/2020 Date