

AUXILIARY SERVICES CORPORATION

NOTE:- ASC requires submittal of original receipts or invoice. **All new vendors must submit a W9 form.** [Click here to access the W9 form.](#)
 - ASC revised CHECK PROCESSING to once weekly every Thursday. Check request received by Monday 5:00 PM of the same week will be processed Thursday of that week providing check request is complete and Vendor/Payee is approved.
 - Check request over \$2,500 must have a second approval signature for non grant/contract accounts
 - A person may not be both a payee and authorized signer. In this case, the payment must be approved by payee's supervisor.

Payee Information:			Requested By:		
Vendor/Payee:			Name:		
STREET			Dept./Room No:		
CITY		STATE	ZIP		Phone/ Ext.:
Fed Tax ID (XXX-XX-XXXX)		Email address		Date:	
IS THE PAYEE A CSUF EMPLOYEE? Yes No		IS THE PAYEE AN ASC EMPLOYEE? Yes No		IS THE PAYEE A US CITIZEN? Yes No	
IS THIS REQUEST FOR SERVICES? Yes No					

If this is a **Rush** request mark the box and indicated date needed Date needed: _____
 (Additional fee may apply)

Description	Invoice Number	Project	Object code	Amount	1099
LESS WITHHOLDING ▶				< >	
TOTAL				-	

ASC Use only - Accounting Department Coding					
PEID:	W9 on File?	Corp.	Sole	Proj- Object	
Desc.	Invoice No.			Invoice Date:	
Invoice Due Date:	1099	Division	Other:		
Audited by:	Remarks: _____				

Sample authorized signatures must be on file at ASC corporate office and agree with the signatures on the request.

Authorized Signatures			CSUF ASC Approval
I certify that the expenses incurred are for bona fide business purposes, and the information provided is true and accurate. I certify that the expenditures benefit the educational mission of the CSU as defined by the respective statutes, Board of Trustees policies, campus policy, and ASC policy, and that all items are for official business and include no personal expense. I certify that the above payments, if made to a student, are NOT contingent upon teaching, research, or any other service performed by the student and that each recipient has been notified of the potential tax liability for any amount in excess of tuition/fees, books, supplies, and equipment for courses or instruction.			
Name of authorized signer (Type or Print)	Signature	Date	Approved by
Name of authorized signer (Type or Print)	Signature	Date	Date