STATE OF CALIFORNIA - FORMS MANAGEMENT CENTER

DISBURSEMENT VOUCHER

STD. 439

PREPARE IN DUPLICATE

DEPARTMENT	DIVISION	LOCATION	DATE

QUANTITY	ITEM	UNIT PRICE	AMOUNT

Chart field

Account (6) | Fund (5) | Department (5) | Program (4) | Class (5) | Project (8)

SUBTOTAL

SALES TAX

TOTAL

PAID BY CHECK NUMBER	DATE

I hereby certify that the above goods and/or services were received and necessary for use of the State of California and that quantity and quality are as indicated.

*NOTE: Employee's must present their **TitanCard** when picking up their cash reimbursement at the Cashier's window. The TitanCard is the official identification card issued by the University to students, faculty, staff or other authorized individuals for the sole purpose of identification.

Receipt of the total amount herein shown is hereby acknowledged.

PRINT NAME OF EMPLOYEE	EMPLOYEE SIGNATURE	DATE	EXTENSION	PRINT NAME OF EMPLOYEE AUTHORIZED TO PICK UP CASH REIMBURSEMENT
PRINT NAME OF APPROVER	APPROVER'S SIGNATURE	DATE	EXTENSION	AUTHORIZED EMPLOYEE'S SIGNATURE

(Rev. 5/2009)