CSUSM CORPORATION GIFT CARD DISRIBUTION LOG AND RECONCILIATION

This form must be used to record the disbursement of	gift cards Once completed	a ccanned convinuet he culmitted to CSII	ISM Corporation, along wi	th the approved gift card reques
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	This form r	nust be used to record the disl	bursement of gift cards. Once	e completed, a scanne	d copy must be sul	bmitted to CSUSM Corporation, alor	ng with the approve	ed gift card request.	_
	Requestor Name:				↓		remaining cards?		
	Principal Investigator or Project Director:				↓	Dollar amount and # of	Cards remianing:		4
	Project #:				-	Provide reason for not o	listributing cards:		
	IRB Protocol # (if applicable): Gift Card Request Form Number:				-				4
	Gift Card Request Quantity and Amount (total):				1	What is the plan for distribu	iting these cards?		
	Employee Recipients (Including Student Assistants		l delines aift cards certificates	and online vouchers	ا no matter how smi	all are always taxable to the employ	vee as waaes		
	Printed Name of Recipient (or Study Subject/Participant ID Code)	Student ID/Employee ID (on campus recipients) or Email Address	Relationship to CSUSM (Employee, Student, Community Member)	Card #	Store/Vendor	Purpose	Gift Card Amount	Recipient Signature	Date Received
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
12									
14									
15									
16									
10 17									
10									
10	* Use additional pages if needed	ı				TOTAL AMOUNT DISTRIBUTED:		-	1
					1	TOTAL ANIOUNT DISTRIBUTED:	<u> </u>		
	Attachments? Yes No		If yes, describe						
CE	ertify that the above log is true and correct. I u	inderstand that I will be res	ponsible for repaying CSUS	6M Corporation in th	ne event any of th	ne incentives were accounted for	improperly or ina	accurately.	
	Requestor Signature			Date	=				Revised

Date

5.20.2020

Requestor Signature