



Foundation

Hospitality Expense Approval Form

Enter Account #: _____ Account Name: _____ Department: _____

I. Requester: _____ Phone: _____ Email: _____ Mail Drop: _____

II. Name of Event: _____ Dates: _____ to _____ Time: _____ # People: _____

III. Description & Location of Event:

IV. Business Purpose: Host to Official Guest	Meeting of an Administrative Nature
Meeting of a Learned Society/Organization	Prospective University Donor Reception

Exception: Other occasions may be reimbursed on an exception basis. All occasions must be approved in advance by the appropriate Vice President/Provost. (Explanation of exception must be noted in VII).

V. Provided: Breakfast Lunch Dinner Light Refreshment

VI. Following Information MUST be Provided/Attached:

1. Estimated Cost of Event
2. Quote/Invoice for Food or Beverages
3. Attendee List (Greater than 12 – Description of a Group, Department and/or Affiliation). (Age 12 and under – individual names, department and/or affiliation).
4. Request for Use of Alcohol (Alcohol being served must be approved 10 days in advance by Divisional Vice President/Provost using form [900-06](#)).

VII. Approvals:

Chair/Department Head: _____ Print Name: _____ Date: _____

Dean: _____ Print Name: _____ Date: _____

VP/Provost/Designee: _____ Print Name: _____ Date: _____

VI. Comments: