

# KOKOMO CAMPUS HOSPITALITY REQUEST FORM

\* indicates required fields

Requesting Unit\*: \_\_\_\_\_ Unit Contact\*: \_\_\_\_\_

Date of Function\*: \_\_\_\_\_ Place\*: \_\_\_\_\_

## PURPOSE OF EVENT:

Detailed purpose of Event\*:

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Hospitality is allowed on the P-Card only with **prior** approval of the Vice Chancellor for Finance. Complete this Hospitality Request Form and obtain all the approval signatures prior to purchasing any merchandise. A copy of this form and itemized receipts must be submitted with the monthly statement for audit review.

If the hospitality expenses are to be reimbursed using Indiana University Foundation funds, please document the IU Foundation account number on the Hospitality Request Form.

University policy regarding allowable hospitality expenses and procedures is available at <http://policies.iu.edu/policies/categories/financial/accounting-administration/FIN-ACC-I-50-allowable-hospitality-expenses.shtml>

*\*\*Purpose – should relate directly to core University business, which are teaching, research and service.*

## ESTIMATED ATTENDANCE:

Employee(s) #: \_\_\_\_\_ Student(s) #: \_\_\_\_\_

Non-University Individuals #: \_\_\_\_\_ Affiliation: \_\_\_\_\_

## FINANCIAL TRANSACTION INFORMATION:

Account Number Incurring Hospitality Expense\*: \_\_\_\_\_ Sub-account: \_\_\_\_\_

Please check the box that indicates where your funding is coming from:

University Funds

Reimbursement out of a Foundation Account; if so, Acct# \_\_\_\_\_

Amount of Transaction\*: \_\_\_\_\_ Document #: \_\_\_\_\_  
(approximate if unknown) (if available)

Vendor/Reimbursement Recipient\*: \_\_\_\_\_  
(Original receipts must be presented for payment.)

## Signatures

Requestor\*: \_\_\_\_\_

Account Manager\*: \_\_\_\_\_

Vice Chancellor for Finance/Fiscal Officer\*: \_\_\_\_\_