

Meals and Entertainment Form

Authorization for Expenditure of Funds for Official Community College Functions

Department/Budget:	
Requesting Individual:	
Event Location/Restaurant/Vendor:	
Date of Event:	
Purpose:	
Names and titles of all attendees:	
Signature:	Date:
Vice President/Department Chair Approval:	Date:
I certify that the above expense is necessary in order to conduct have been accomplished otherwise. My signature on the Reinexpense.	-

Note: Paid receipts itemizing costs(s) to be reimbursed, agenda (if applicable) and sign-in sheet of all attendees must be attached to the voucher.