

Hospitality Meal Worksheet

Hospitality information

INSTRUCTIONS:

Meal date: Meal type:

- Complete this form using Adobe (not web browser)
- Complete one form for each meal
 - o If there are multiple receipts for the same meal, add those together as one
- Attach this completed form to the expense along with the receipt/invoice, approved Hospitality form, backup, etc.

			<u> </u>
Subtotal:			
Tax:		Actual tip/gratuity	Tip/gratuity max
Tip/Gratuity:			<u> </u>
Total:			
this box is checked, you have exceed		n per-person allowance. H	ere are your options:
a) If not yet paid, use non-state fu			* /-**h
b) If already charged to Pcard, rei		-	it (attach receipt here), or
c) If reimbursement, reduce the a		· ·	to approve an evention to the
			e to approve an exception to the cive AVP or VP, and CFO for revie
approval.	, piease do so bi	elow and submit to respec	ive Avr of vr, and cro for levie
арргочат.			
Signature of Division AVP or VP:			
Signature of Division AVP or VP: Signature of CFO:			
Signature of CFO:			
Signature of CFO: this box is checked, your tip exceede	ed the 20% maxi	mum allowance. Here are y	our options:
Signature of CFO: this box is checked, your tip exceede a) Use non-state funds instead			
Signature of CFO: this box is checked, your tip exceede a) Use non-state funds instead	imburse the cam	pus for the overage amour	our options: It (receipt must be attached here