

Business Meal Documentation Form

For internal use only, keep this form with the itemized receipt and retain with the monthly statement.

Use of this form will ensure that you have documented the required information supporting all food purchases. For more information regarding business meals or recruitment/entertainment, please refer to **Policy 3-031**. All business meal procurement must comply with this policy including no meals while on travel status. For a complete description, consult the University of Utah website: www.utah.edu.

Name of person who authorized purchase:	
Name of Cardholder:	
Merchant Name:	
Date of Purchase:N	umber of attendees:
If there are 10 attendees or less, please list their names below:	
Name:	Name:
* Please note: An employee must be present at business meals	
Business Purpose, please be specific:	
Was alcohol purchased? If yes, what fund was it reallocated to?	
Alcohol cannot be paid for using the following funds without approval from the cognizant vice president: State-appropriated, grants and contracts, reimbursed overhead or ASUU. With department or college approval, funds allowed to pay for alcohol are: 2000-2404, 4900-4913, 6000 or 9000.	

Email: pcard@purchasing.utah.edu | Phone: 801.587.7859 | Fax: 801.581.8609