

REQUEST TO SERVE FOOD

AT MEETINGS AND TRAINING SESSIONS

Accounts Payable
WSU Controller's Office
Pullman, WA 99164-1025

Complete this form whenever meals or light refreshments are served at a University training session or meeting. Attach a copy of the brochure or registration form.
Refer to BPPM 70.31 for complete instructions.

NAME OF EVENT		PURPOSE OF EVENT	
EVENT DATE	EVENT BEGIN AND END TIMES	EVENT LOCATION	
SPONSORING DEPARTMENT		DEPARTMENTAL CONTACT NAME	CONTACT TELEPHONE NO.
_____ TOTAL NUMBER OF ATTENDEES _____ NUMBER OF STATE EMPLOYEE ATTENDEES			

LIST OF ATTENDEES (Describe relationship to University, e.g., employee, guest, official) Attach additional page if necessary.

NAME	RELATIONSHIP	NAME	RELATIONSHIP

ACCOUNT CODE

COST CENTER	REGION	FUND	FUNCTION	GIFT	GRANT	PROGRAM	PROJECT
METHOD OF PAYMENT (Check one): <input type="checkbox"/> Employee reimbursement <input type="checkbox"/> Direct supplier payment <input type="checkbox"/> IRI							

☐ Check if meals will be served. Indicate which meals will be served: ☐ Breakfast ☐ Lunch ☐ Dinner

☐ Check if refreshments will be served.

☐ Check if the event is to be held in a state of Washington facility. If not, provide explanation below.

NAME OF MEETING/TRAINING COORDINATOR	SIGNATURE	DATE
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CERTIFICATION

*I certify that the listed attendees are required to attend the indicated meeting or training session. Official state business will be conducted.
Meals or light refreshments are an integral part of the event.*

NAME OF APPROVING OFFICER	SIGNATURE	DATE
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