

JACKSONVILLE STATE UNIVERSITY REQUEST  
FOR MEAL/ENTERTAINMENT PURCHASES

Date of Event: \_\_\_\_\_

Place of Event: \_\_\_\_\_

**PURPOSE:**

CHECK ONE:

Faculty or Staff Business \_\_\_\_\_

Official Guest(s) \_\_\_\_\_

Prospective Faculty/Staff \_\_\_\_\_

Conference/Workshop \_\_\_\_\_

**VENDOR:**

Vendor Name: \_\_\_\_\_

Vendor No: \_\_\_\_\_

Address: \_\_\_\_\_

**PLEASE LIST BELOW THE PERSON(S) OR GROUP(S) BEING ENTERTAINED:**

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

JSU EMPLOYEES ATTENDING:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position

I certify that the administrative or educational benefit derived from this expenditure was not otherwise obtainable and that authorization is given to expend budget funds. A brief explanation of the benefit to be derived is \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Requested by: \_\_\_\_\_ Date: \_\_\_\_\_ Account No: \_\_\_\_\_

Recommended Approval: \_\_\_\_\_  
(Budget Manager)

Approved: \_\_\_\_\_

ATTACH INVOICES