

Business Meal Request

Mathematics Department

Date: _____

Name: _____ U of Utah ID: _____

Email: _____ Phone: _____

Chartfield: 01 - 00124 - _____ (Fund) - _____ (Activity or project)

Faculty Signature: _____
(Faculty Responsible Signature)

All business meal purchases will be made with University of Utah Departmental P-Card and will comply with

University Policy and Procedure 3-11. This form along with an *itemized* receipt (s) of meal procurement and alcohol will be required to ensure that the information provided supports the business meal.

By signing above I understand that I am responsible for transactions made on the PCard while it is in my possession. All purchases must be made on behalf of the University and comply with current guidelines for restricted items and requesting Utah Sales Tax exemption. I will submit an itemized receipt when I return the card.

Business Meal Request Requirements:

- **Business Meal Purpose: (be specific, including what type of group was involved)**

- Number of people in attendance _____ (If less than 10 attendees; list the names of those present below)

- Was alcohol purchased? _____ If yes, please provide a separate itemized receipt of ALL Alcohol purchases.
- An itemized receipt of food purchase is required. Please make sure you notify merchant that you are tax exempt.

Merchant Name – (Each Receipt)	Receipt Total w/o Tax
Alcohol	
Tip	
TOTAL	