

HOSPITALITY REQUEST FORM

Background

BP6350 and AP6100 require all hospitality to be approved by an authorized individual. Authorized hospitality approvers include the Chancellor, Vice Chancellors, and Presidents.

To ensure NOCE is following Board Policy, all hospitality expenses must be **pre-approved** by the President before the expense is incurred. Approval by the President must be noted when submitting the purchase requisition and the approved form must be submitted with invoice or petty cash voucher, regardless of the funding source.

Approval Instructions

To obtain approval for hospitality, complete the Hospitality request form. Send the completed form to the NOCE Vice President who oversees the department. The Vice President will review the request and if approved will forward to Director, Administrative Services. Director of Administrative Service will forward to President for final approval. The President will return the final approved Hospitality Form to original requestor and send a copy to Director, Administrative Services.

Guidelines

To assist with estimating how much budget to request, use the following guidelines:

Breakfast \$8
Lunch \$12
Dinner \$14
Snacks \$3

This is the max amount per attendee, per meal to be requested.

Note: The approved Hospitality request form should be attached with the invoice for payment as support that the expense was approved.

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Complete the fields below and submit to your Vice President for approval.

Name of Requestor:

Location of Event (AC, CC, WIL, Other):

Department Sponsoring Event:

Event Date:

Event Title:

Total Amount Requested
(amount not to exceed)

Event Details (school business purpose, # of attendees, etc.)

Budget: **Hospitality Budget (Fund 34220)** If requesting budget -Fund 34220 select an expenditure category below:

- Function for retiring employees (52722)*
- Act's honoring individuals in education (52723)*
- Flowers and cards for special occasion (52727)*
- Seminar and workshops (52728)*
- Group planning and operational meetings (52731)*

Other Funding Source (provide Fund #)

-----**For Office Use Only**-----

Vice President, Instruction or Student Services Initials _____

Director, Administrative Services Initials _____

Approved

Not Approved

President Signature

Date