



P-CARD FOOD PURCHASE FORM

Date of Event: _____

Requesting Individual: _____

Department: _____

Restaurant/Vendor: _____

Location of Event: _____

Purpose of Event: Please place an "X" in the corresponding box

Department Meeting: Business Meal: Other:

- Please describe the business purpose:

NAMES OF PARTICIPANTS**TITLE/AFFILIATION

**If more than 5 people were present, give a general description of who attended the event with the name or names of the people leading the event.

1. _____
2. _____
3. _____
4. _____
5. _____

Approvals:

Signature of Requesting Individual (Employee) Date

**Please attach Itemized receipt for purchase: See note for instructions*

**Note: Please attach itemized receipt (taped on all four sides). If the receipt is too long for the page, please cut and attach the receipt to a separate piece of paper.*