

District Meeting Expense Authorization

ATTACHMENT A

Request for prior authorization for meeting expenses including meals with meetings/coffee & light refreshments form. . Districts must have a policy in place for meals with meetings and light refreshments. This form is to be completed and signed by the requesting staff member for prior authorization and given to an authorized district signatory.

Purpose of Meeting: <input type="checkbox"/> Meeting <input type="checkbox"/> Conference <input type="checkbox"/> Workshop <input type="checkbox"/> Other Please specify "Other": _____	Estimated cost of meeting: Actual Cost
Place of Meeting:	Date(s) of Meeting:

Facilities and Meal/Refreshments

Beverages

Please check applicable items and indicate amount beneath each

Coffee
 Tea
 Juice
 Soda Pop
 Other (please specify)

Refreshments

Please check applicable items and indicate amount beneath each

Muffins
 Pastries
 Cookies
 Fruit/vegetables

Will meals be provided Yes No

	Number	Dates
Breakfast		
Lunch		
Dinner		
		Estimated Cost
Name of Caterer or Company providing Meals		
Equipment Rental		
Meeting Room Rental (must meet ADA requirements)		
Coffee/Light Refreshments		

Please describe how this meal or light refreshments is an integral part of the meeting:

Participants

Name	Organization/Agency	Name	Organization/Agency

Note: When turning in the invoice for the meals with meetings or coffee and light refreshments, please make sure an actual meeting list of attendees and meeting agenda are also attached.

Requested by: _____ Date _____

Approved by: _____ Date _____