

INDIANA UNIVERSITY SOUTHEAST HOSPITALITY DATA FORM

This form must be attached to any KFS financial documents charging a hospitality object code. It should also be included electronically with the receipt in Chrome River as supporting documentation for any P-card transaction with hospitality charges.

Note: Contracts & Grants Administration has final approval for all grant-related expenses.

Contact Information

Contact Name: _____ Department: _____

Email Address: _____ Campus Phone: _____

Event Information

Name of Event: _____

Date(s) of Event: _____ Event Location: _____ Fee (if applicable): _____

Start Time: _____ End Time: _____

Nature of Event (give detail):

Purpose/Benefit to the University:

Event Attendance Information

of IU Faculty: _____ # of IU Staff: _____ # of IU Students: _____

of Non-IU Individuals: _____ Affiliation with IU: Alumni Community Parents Other _____

Account & Financial Expense Information

Amount Requested: _____

Source of Funding Used: _____ If Other, explain: _____

Account: _____ Sub-Account: _____

Requestor: _____
Name Date