## SPECIAL EXPENSE – CAMPUS FUNDED EVENT – PAYMENT REQUEST

SUBMIT TO ACCOUNTING SERVICES (US-103) TWO WEEKS PRIOR TO THE EVENT UNLESS RECEIPTS ARE REQUIRED.

1.	Name of Event:		Date of Ev	Date of Event:	
			Estimated	Estimated Cost:	
2.	Attendance Information				
	# of IU Faculty:	# of IU Staff:	: # of IU Stu	dents:	
	# of Non-IU Individuals: Affiliation with IU: Alumni Community Parents Other				
3.	Please select an event type.				
	FYS Social	Popcorn Fund	☐ Candidate Recruitment	Other	
	#Faculty may request up to \$60 per class section. ITEMIZED AND PROOF OF PURCHASE RECEIPTS REQUIRED.  *Faculty may request up to \$15 per class section. NO RECEIPTS REQUIRED.  *Faculty may request up to \$15 per class section. NO RECEIPTS REQUIRED.  *CANDIDATE RECRUITMENT - ITEMIZED AND PROOF OF PURCHASE RECEIPTS REQUIRED.  The following meal limits apply:				
	BREAKFAST \$10.00 LUNCH \$15.00 DINNER \$25.00		of \$30.00		
4.	Was this event approved during budget construction or as a mid-year request?  Yes No For events marked as Other, please provide your Event Approval Code: *If no, please submit the Mid-Year Hospitality Request Form to Accounting Services for review and approval.				
5.	5. Billing Information: Please mark one option.    IU Southeast Conference & Catering Please provide Facility Reservation #:    Personal Reimbursement   P-Card Who approves the KFS P-card documents for your card?				
	Name of Requestor		Department/Schoo	I	
	Signature of Requestor		Date		
FOR AC	COUNTING USE ONLY				
	Signature of Approver		Date		
ACCOU	NT: 0850514 SUB-AC	CCOUNT:	SUB-OBJ CODE:		