

Hospitality Justification Form

Required for hospitality related expenses including, but not limited to, entertainment services, food and beverages, awards and incentives, and promotional items. Attach this completed form to your purchase requisition or disbursement request.

| Name of Host/Sponsor: | |
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| | Time: |
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Location:

Guest List: If there are 10 or more attendees, please attach a guest list that includes the name and relationships of guest to the Research Foundation/University, (i.e., donor, faculty/staff, student, prospective student, official guest, etc.)

| Name | Relationship to University | | | |
|------|----------------------------|--|--|--|
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| Type of Hospitality: | Type of Event: |
|---|----------------------------------|
| Type of Meal: | Estimated Cost Per Attendee: |
| Will there be alcoholic beverages served at the event? | |
| Have you obtained a catering waiver if not using Aztec Shops | for on campus catering? Yes 🗌 No |
| If this is a recurring meeting, what is the frequency: | |
| Business Purpose / Benefit to SDSU Research Foundation/Univ to the SDSURF/University. Given that judgment is very often ar | |

Expenditure Distribution Account

| Fund | Org | Account | Project | |
|----------------------------------|------------------------|------------------------|---------|--|
| | | | | |
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| necessary, appropriate to th | e occasion, reasonable | in amount and serves a | | nt you deem this hospitality expense is nission and fiduciary responsibilities oj <u>v</u> for further explanation). |
| Project Approver (print & sign): | | | | Date: |
| SDSURF Approver (print & sign): | | | | Date: |
| Additional Approver (pr | rint & sign): | | | Date: |

As the SDSURF Approval Authority, I have authorization to provide fiscal approval of this expense and verify the proper use of funds.