

Entertainment/Official Reception Request

Section 1 - Event Host

Individual/Group Name: _____ Request Date: _____
 Department: _____ Phone #: _____
 Location of Event: _____ Event Date From: _____ To: _____

Section 2 - Accounting Information

Amount \$ _____ Authorized Fund _____ Org _____ Acct _____ Prog _____

Section 3 - Attendees

Who will be attending the event?
 Employees Only Students Only Rowan Employees, Students, and/or Non-Employees

Business Purpose

For on-campus events: food/beverage purchases totaling \$100 or more must have an approved Gourmet Dining waiver.

Do you have a Gourmet Dining waiver? Yes No N/A

Meeting agenda will need to be provided when reconciling the expense via Pcard or requesting reimbursement.

Event Time Start: _____ End: _____

List of Attendees:

	Name	Title	Classification