SPECIAL EXPENSE – CAMPUS FUNDED EVENT REQUEST

SUBMIT TO ACCOUNTING SERVICES (ES 331) TWO WEEKS PRIOR TO THE EVENT UNLESS RECEIPTS ARE REQU

1. Name of Event: _____ Date of Event: _____

   Event Location: _____ Estimated Cost: _____

2. Attendance Information

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

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

3. Please select an event type.

   ☐ FYS Social ☐ Popcorn Fund ☐ Candidate Recruitment ☐ Other

FYS SOCIAL Class Number (i.e. COAS 104): _____ Section Number: _____
*Faculty may request up to $60 per class section. ITEMIZED AND PROOF OF PURCHASE RECEIPTS REQUIRED.

POPCORN FUND Class Number (i.e. GEOG 101): _____ Section Number: _____
*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	Host + Candidate Max of $20
LUNCH	$15.00	Host + Candidate Max of $30
DINNER	$25.00	Host + Candidate Max of $50.00

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
   * please submit the Mid-Year Hospitality Request Form to Accounting Services for review and approval.

5. Billing Information: Please mark one option.

   ☐ IU Southeast Conference & Catering -- Please provide Facility Reservation #: _____

   ☐ Personal Reimbursement

   ☐ P-Card ----- Who approves the KFS card documents for your card? _____

_____ _____
Name of Requestor Department/School

_____ _____
Signature of Requestor Date

FOR ACCOUNTING USE ONLY

_____ _____
Signature of Approver Date

ACCOUNT: 0850514 SUB-ACCOUNT: _____ SUB-OBJ CODE: _____