



THE OHIO STATE UNIVERSITY
 OFFICE OF ACADEMIC AFFAIRS
 MEAL RECORD FORM

CONTACT NAME:	CONTACT PHONE:
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DATE OF MEAL:	TIME:
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PLACE:

BUSINESS PURPOSE

ATTENDEES

FUNDING SOURCE FOR EXPENDITURE

ORG	FUND	ACCOUNT	PROJECT	PROGRAM	USER DEFINED	AMOUNT
		64408 Business Meals				
		64493 Meals at Univ Functions				
		64494 Refreshments at Univ Meetings				
	<i>must be on a Discretionary fund</i>	64430 Alcohol				

SIGNATURES

PURCHASER:	DATE:
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APPROVER:	DATE:
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ALCOHOL APPROVER:	DATE:
Unit Head or Designee	