



HOSPITALTY JUSTIFICATION FORM

Business Unit:

Payee Type:

This section is not required for ProCard purchases

Date:	Payable to:	Cal Poly Humboldt ID:
Address:		
Department:	Contact:	Ext:

Total Amount:

Line Item Name	Amount	Account	Fund	Dept. ID	Program	Class	Project
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Type of Event:

Type of Hospitality:

Notes:

Business Purpose of Meeting Event:

Is this a reoccurring meeting?

If yes, how often:

Event Location:

Date of Event:

Attendee Name:

Attendee Business Relationship to Campus:

For a large group (10 or more people) where the names of attendees are unknown, a description of group and estimated cost of the meal per attendee is sufficient.

Meal:

Cost of Meal per Attendee:

Approval*

MPP or Department Chair Signature:

Exception Approval by CFO**

Signature:

Print Name:

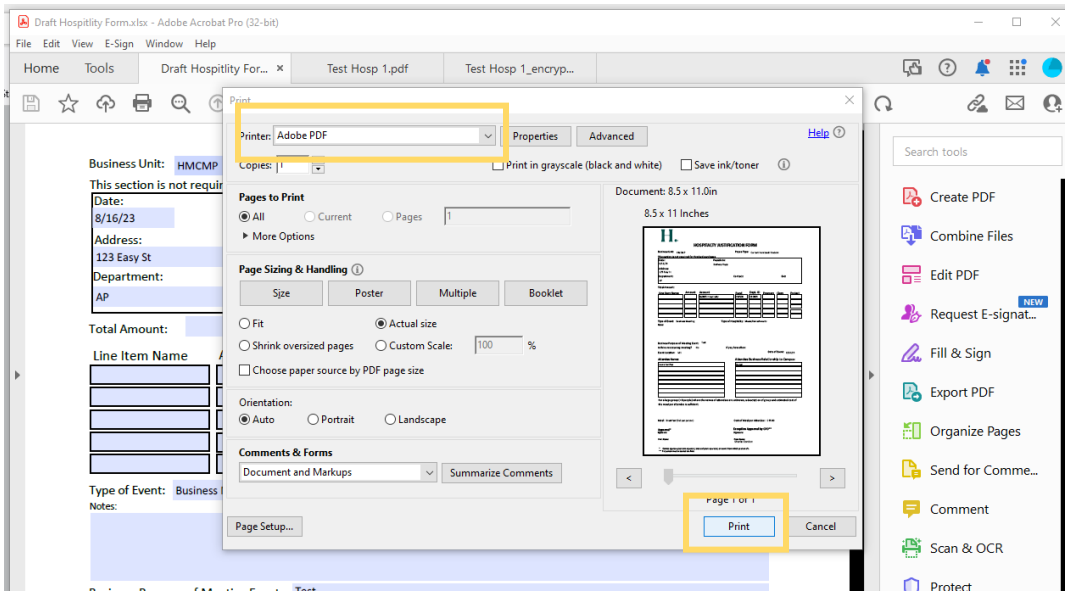
Print Name:

* Cannot approve your own expenses, those of your supervisor, or events from which you benefit. Must be signed by MPP or Department Chair.

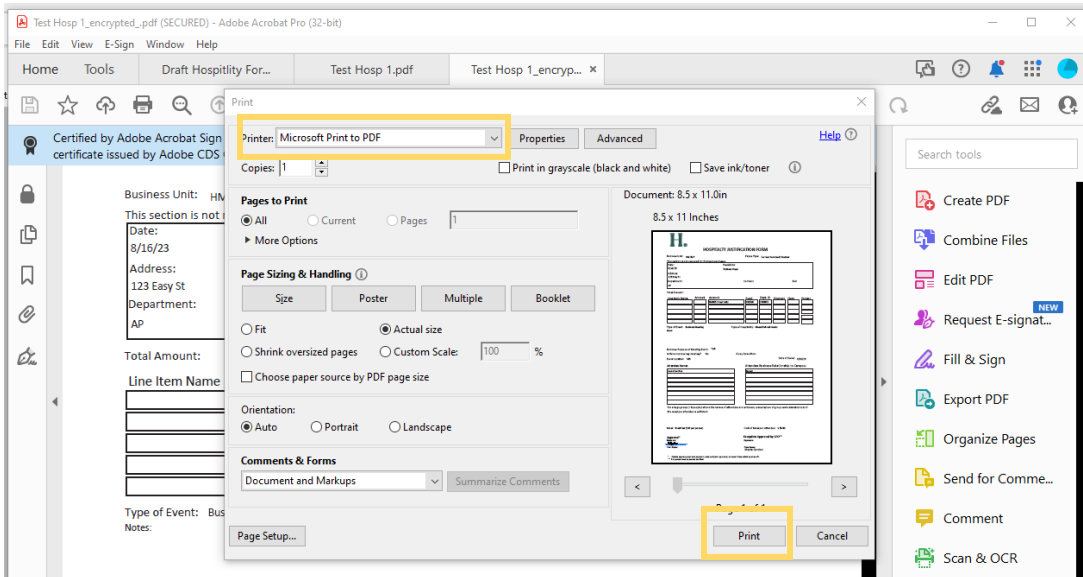
** Per person meal exceeded the limit.

AdobeSign Routing Instructions

- Once Hospitality Form is filled out “Print” the form and select “Adobe PDF”:



- Upload the PDF into AdobeSign to add signature field and route for signature (Resources [here](#) for Adobe Guides).
- When all signatures are collected, download the copy from AdobeSign, and “Print” the form to “Microsoft Print to PDF” to remove the encryption ([Submit a Help Ticket](#) if you do not already have “Microsoft Print to PDF”). **Encryption must be removed** before combining into ProCard Reconciliation or submitting for Direct Pay.



ProCard Reconciliation: Once encryption is removed, you can add this signed form into your ProCard Reconciliation.

Direct Pay: Once encryption is removed, combine form and all supporting documentation into a single PDF and email to humboldt.invoices@trustflows.com.