Request to Purchase Official Business Meals

Date of Function: _______________________

Name of Vendor: _______________________

Business Purpose: _______________________

Within State Rate: $__________

Exceeds State Rate By: $__________

IN-STATE RATES PER PERSON
NEW RATES EFFECTIVE JANUARY 17, 2006
Breakfast $7.00   Lunch $11.00   Dinner $18.00

Exceeds State Rate By: (Business meal reimbursements above 50% over the applicable per diem guideline is not permitted)

Justification for Exceeding State Rate: _______________________

(Please attach the agenda and a list of attendees)

Supervisor’s Approval _______________________

Date _______________________

President or Designee _______________________

Date _______________________

Business meals must be approved in advance by the President or his designee and cannot exceed the 50% per diem. Meals must be considered essential to the Agency’s mission, a business necessity and involve substantive and bona fide business discussions. Rates should not exceed the amount shown for the applicable meal in the M&IE rate table above. If the meal exceeds the rate, you will need to provide sufficient justification.

A COPY OF THIS FORM MUST BE ATTACHED TO THE BID SHEET, FORWARD TO THE BUSINESS OFFICE, THE ORIGINAL ITEMIZED RECEIPT.