



TRUCKEE MEADOWS COMMUNITY COLLEGE

Controller's Office

Host Expense Documentation and Approval

(This form **MUST** be attached to the payment request with ORIGINAL receipts)

	Date of Event	Name/Description of Event and HR# if applicable	Location of Event	Participants/Purpose	Amount	Purchasing card, personal card, cash or DPO #
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

PAYMENT AND APPROVAL INFORMATION:

ISSUE A CHECK PAYABLE TO (PLEASE PRINT):		EMPLOYEE ID NUMBER:	
ACCOUNT NUMBER TO BE CHARGED:	AMOUNT:	DPO NUMBER (PLEASE ATTACH):	
ACCOUNT NUMBER TO BE CHARGED:	AMOUNT:	SUBMITTED BY (PLEASE PRINT):	DATE:
APPROVED BY (SIGNATURE REQUIRED):	DATE:	ADDITIONAL APPROVAL SIGNATURE, IF REQUIRED:	DATE:

Note: If a college purchasing card was charged for the host expense, write "Purchasing Card" in the "Issue a Check Payable To" section and attach this form with the original receipts to the Purchasing Card statement.