

OFFICIAL / TRAINING FUNCTION APPROVAL FORM

This form is used to request <u>pre-approval</u> for all events with planned allowable food purchases - whether catered internally by the cafeteria or by an external vendor. **ALL** costs associated with the training or official function must be included in detail. Please visit www.rrcc.edu/purchasing for definitions and frequently asked questions.

SECTION I: Complete this section in its ENTIRETY before your event.

Department:	Contact:		_ Ext:	
Vendor(s):				
(Include all vendors)				
Function Date(s):	Time F	Range:	0	RG(s):
Detailed description of event to inclu	do the business nume	200		
Detailed description of event to include	the business purpo	ose.		
Select one of the following options. I college funds may be used for your e	· •	se contact the Procu	rement Ma	nager at ext. 6345 to verify tha
conege funds may be used for your e	vent.			
All-campus meeting	College sponsored recognition (i.e. retirees)			Committee interview days
Outside guests (i.e. Advisory Cour	ncil. Board Meeting. P	ublic Event. Open Ho	ouse)	
	_			
State employees are in attendance	e (MUST be limited to	o training functions a	and group m	neetings at least 4 hours' long)
Other	(if this	s box is checked mus	t have appr	oval from Procurement Manage
	(11 61116	box is effectived finds	chare apply	sva. Hom Podarellie i Manage
Estimated event cost breakdown: Sug	gestion is to follow Der			Lunch \$12, Dinner \$23
Catered cost per person		Other costs (attach details)		
Number of attendees		Room cost		
Total catered cost		Total	other cost	
	TOTAL EVENT COST			
Checklist MUST be initialed:				
Checked with the Cafeteria to see	if they can provide se	ervice for my event E	SEFORE wor	king with outside vendors.
Food and or beverages are not be	ing purchased for reg	ular staff meetings o	r staff depa	rtures other than retirees.
Alcohol is NOT being purchased of	r reimbursed.			
This form is completed in its entire	ety and submitted to	a VP or President fo	r pre-appro	val with agenda/event
announcements, etc. and estimat	ed costs (i.e. quotes/p	rice sheets) for appro	val.	
I will collect a sign-in sheet with a	list of attendees.			
OR Exception: All college staff	or general public eve	nt.		
Org Owner Signature:			Date:	
VP/President Signature:			Date:	
onder \$3,000, VP will sign. Over \$3,000, Presi				
	ECTION II: Complete			
Invoice Checklist MUST be initialed o	r marked N/A:			
The invoice is within 10% of the ini				
OR If it is over, have the VP or		t to the revised amo	unt.	
Cafeteria: Upon receipt of the invo				5.
Outside Vendor: Complete paymen	_ · · · · · · · · · · · · · · · · · · ·			
OR If Purchase Order was issu				
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