



**NORTHERN ARIZONA UNIVERSITY**  
 Contracting and Purchasing Services  
**BUSINESS FOOD/MEAL PURCHASE  
 AUTHORIZATION**  
 928-523-4557

RETURN TO:  
 NAU Box 4014  
[AccountsPayable@nau.edu](mailto:AccountsPayable@nau.edu)  
 (or upload with PCard  
 documentation)  
 Revised 11/22/2016

**Information**

In accordance with University Comptroller policy CMP #420-02 Food and Refreshments, this form shall be completed and submitted to [AccountsPayable@nau.edu](mailto:AccountsPayable@nau.edu) referencing the associated financial system transaction ID, or retained with the appropriate PCard log.

Sponsored Projects: Purchases of food and/or meals on sponsored projects is allowed ONLY IF the food and/or meal purchase was approved in the funded proposal or in a written modification subsequent to the award. In most cases, food and meal purchases on sponsored project accounts are unallowable. Refer to OMB Circular A-21 Section J, throughout, for specific restrictions related to food and/or meal purchases for a variety of different activities. Contact the Office of Grant and Contract Services or Sponsored Project Services if you have questions regarding the allowance of food/meal purchases on your sponsored project.

**Contact**

Department Name:

Department Contact:

Contact Phone #:

Contact E-mail:

**Business Purpose**

Describe business (public) purpose:

**List of Attendees**

1.

2.

3.

4.

Attach additional sheet if necessary.

**Acknowledgement**

I acknowledge and certify that no alcoholic beverages, or associated tax, are being reimbursed.

I acknowledge that as a public entity the University shall conduct itself in such a manner as to foster public confidence in the integrity of the University procurement operation and withstand the scrutiny of the public. I certify that the following purchases serve the public purpose and further the mission and goals of the University and the Arizona Board.

**Cardholder** (For PCard Purchases Only)

Name:

Date:

Signature:

**PCard Approver** (For PCard Purchases Only)

Name:

Date:

Signature:

**Department**

Signature:

Name:

Date:

**VP or VP Delegate** (as documented in memorandum on file in Contracting and Purchasing Services)

Signature:

Name:

Date: