

Business Meals Form

Name:

PO or travel voucher number:

Date and time of meal:

Purpose of meal (include specific information about how it relates to University business):

Please list all attendees.

	Name	Company Name
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		

Submit this form to RINSTAP@kumc.edu or RINSTTRAVEL@kumc.edu with other supporting documentation.