

Pinal County
Business Meals and Related Expenditures Form

Location of Event:		Event Date:	
Business (Public) Purpose: Please explain the public purpose. If only Pinal County personnel are present at the meal, clearly justify why this expenditure is appropriate. Attach agenda/program when available:			
Fund/Cost Center:		Total Amount:	
List of Attendees (Attach additional sheet if necessary):			
Pinal County Staff			
Name:	Department	Title	
1.			
2.			
3.			
4.			
5.			
6.			
Other Attendees			
Name:	Affiliation	Title	
1.			
2.			
3.			
4.			
5.			
6.			
If a large group is present at an event and an attendee list is not available, state the approximate count of attendees and the Pinal County Department or affiliation.			
No reimbursement for alcoholic purchases is allowed.			
I certify that no reimbursement for alcoholic purchases is being sought.			
Requestor's Name	Phone Number	Signature	Date
Required Approval: Elected Official, Presiding Judge, County Manager or Assistant County Manager before the event occurs.			
Print Name	Signature		Date