



SMR #

University of Louisiana at Lafayette
 Administration and Finance
 Purchasing Office
 104 University Circle

REQUEST FOR AUTHORIZATION OF SPECIAL MEAL

Form PUR-109

Please follow PUR-109 instructions when completing this form.

| | | | |
|----|--|---|---------------|
| 1 | Request Date | | |
| 2 | Host Individual/Group | | |
| 3 | Host's Department | | |
| 4 | Contact Name | Phone | E-Mail |
| 5 | Date of Function | Time of Function | |
| 6 | Name of Function Location | | |
| 7 | Function Purpose/Benefit to UL | | |
| 8 | University Event | Yes | No |
| | | Sodexo | Caterer |
| | | Self-Catered | Restaurant |
| | | If catered, Caterer or Restaurant Name Must Be Provided _____ | |
| 9 | Number of Guests | Breakfast | Lunch |
| | | Buffet | Reception |
| | | Dinner | Refreshments |
| 10 | Estimated Cost | | |
| | Price Per Guest | Total Cost | |
| 11 | Please indicate payment method. LaCarte Personal Reimbursement Requisition Sodexo If the meal exceeds the state allowance, the overage will not be reimbursed and must be paid with Non-University funds. | | |
| 12 | Fund _____ | Org _____ | Account _____ |
| | Program _____ | Amount _____ | |
| | Fund _____ | Org _____ | Account _____ |
| | Program _____ | Amount _____ | |

Note: Payment for alcohol is prohibited using University funds.

APPROVALS

| Date | Signature | Department |
|------|-----------|--|
| | | Department Head |
| | | Supervising Dean |
| | | Supervising Vice-President |
| | | Provost/Vice-President of Academic Affairs (necessary for faculty only) |
| | | Comptroller/SPFAC |
| | | Director of Purchasing |
| | | Vice-President of Administration & Finance |

PUR-109, "Request for Authorization of Special Meal" Instructions

After this form has been completed and approved by department head, Dean, VP, etc., it should be forwarded to the Purchasing Office where it will be reviewed for compliance with applicable law and policy. If the request is in compliance, the form will be approved and returned to the requesting department. If the request cannot be approved, the form will be returned to the requesting department with a memo of explanation as to why the request cannot be approved.

Box

1-8 Self-explanatory.

| Caterer/Restaurant | PUR-109 Required? | Is Competitive Pricing/Requisition Required? |
|--------------------|-------------------|---|
| Sodexo | Yes | No , Department is to utilize CaterTRAX* |
| Non-Sodexo | Yes | No , if cost of meal <\$5,000 |
| Non-Sodexo | Yes | Yes , if cost of meal >\$5000 |

[*For events catered by Sodexo; departments are to utilize CaterTRAX \(https://louisianaspice.catertrax.com/\).](https://louisianaspice.catertrax.com/)

For events not catered by Sodexo where the total cost of the meal exceeds \$5,000, this form must be attached to a requisition. If not using Sodexo, name and "Remit To" address of restaurant or caterer must be provided.

[Please refer to http://purchasing.louisiana.edu/ for specific rules concerning the University's purchasing requirements.](http://purchasing.louisiana.edu/)

9 # of Guests – The number of persons invited to the function must be provided.

Type of Meal to be provided – Maximum allowances (per person) according to PPM49 must be adhered to:

1. **Meals** (sit-down, buffet, reception or catering) - must comply with PPM 49

If meal is a working lunch, rates must comply with PPM 49 Tier 1.

If meal is for an invited guest, rates are not to exceed: Breakfast \$10/person, Lunch \$15/person, Dinner \$30/person (an additional amount for tip is allowed, but may not exceed 20% of allowable bill)

Note: 1) A roster, sign-in sheet, or guest list including name, organization & affiliation with University must be attached to Reimbursement Request, LaCarte log or invoice.

2) Reimbursement for alcohol with University funds is prohibited.

3) Individual meals incurred while on University travel are **NOT** allowed on LaCarte.

2. **Refreshments** (limited to beverages and snack per morning & afternoon session)

➤ Self-catered & catered events - \$4.50 per person (must comply with PPM 49)

10-11 Self-explanatory.

Note: If the meal exceeds the state allowance, the overage will not be reimbursed and must be paid with Non-University funds (private or Foundation funds).

12 Fund, Org., Account, Program– This form should be used only for functions paid from University funds. If the function is to be paid from Foundation funds, this form is not required. Such payment requests should be submitted to the Foundation according to Foundation requirements.

Note: When Sodexo is the caterer and the invoice is not submitted for payment by the requesting department within 30 days of the invoice date, University has the authority to use this approved form as authorization to submit the delinquent invoice for payment. The department account information indicated in Box 12 will be charged.