TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

PRE-APPROVAL FORM
Official Functions, Business Meetings and Entertainment Events
Required for Expenses > $500

1. TOTAL ESTIMATED COST OF EVENT
   By Category:
   Food
   Alcohol ***
   Entertainment
   Decorations
   Facility Cost
   Other (detailed) ____________________________________________

   _________________________________________________________

   Total Cost $ __________________
   *** Approval required from the President's Office if the event is held on TTUHSC/TTU Campus

2. PURPOSE (A business purpose that serves the institutional mission is required.)
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

3. DATE AND LOCATION OF EVENT
   __________________________________________________________________________

4. REQUESTOR NAME _________________________________________________________
   E-mail Address ____________________________ Phone ____________________________

   This form must be attached to all Payment Requests processed in the Direct Pay System or attached with Purchasing Card transactions as supporting documentation.

5. APPROVALS

   Approvers have determined that the expenses for this event have a business purpose, serve the institution's mission and are appropriate and reasonable considering budget and financial priorities. The Department Head must approve all expenses of $500 or more. The Department Head and one of the following signatures are required when expense are $1000 or more: Dean, Regional Dean, Vice President, or President when appropriate, for the respective area.

   Signature of Department Head ____________________________ Date

   Signature of Dean/Regional Dean, Vice President, or President ____________________________ Date