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**LOUISIANA TECH UNIVERSITY**

**Supplemental Information for  
Food or Meal Purchases**

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1. Name of function held: \_\_\_\_\_
2. Date of function: \_\_\_\_\_
3. Location of function: \_\_\_\_\_
4. Purpose of function: (Explain Fully) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Number of people attending: \_\_\_\_\_
6. Where appropriate and feasible, list below or on a separate sheet the individuals (by name and title) attending the function:

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**APPROVED:**

\_\_\_\_\_  
**Department Head**

\_\_\_\_\_  
**Dean**

\_\_\_\_\_  
**Vice President**

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