



P-Card Food & Beverage Restriction Waiver

Vendor Information

Vendor Name

eVA Registered Vendor? Yes No

If "No", why isn't an eVA vendor being used?

Event Type

If "Other", please describe

Recipients

If "Other", please describe

Will the event be funded by participant fees? Yes No

Is a meal being provided as part of a contractual obligation? Yes No

Has an approved F&B Form been obtained? Yes No

How many people will attend?

What is the approximate cost of the F&B?

Cardholder Signature

Supervisor Signature

Department Information

Dept Name

Cardholder Name

Fund/Org

Supervisor

Contact Name
if different than cardholder

Date of Event