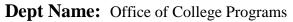
Month: July

Fiscal Year: 2008 Dept ID: 100900



Contact Name: Jane Doe **Contact Phone:** 8-9999



Aramark Dining Services Meal Voucher Monthly Usage Log

(Substitute Food & Beverage Certification Form)

Date	Contract Number	# of Tickets Purchased	# of Tickets Used	Attendees (Attach additional sheets as needed)	Meal Business Reason	Explanation (Attach additional sheets as needed)
Previous month carryover		20				
7/10/07	123456	20			Bulk Voucher Purchase	Bulk Purchase
7/12/07			10	See attached sign in - 10 people	Student Function	Small group Freshman orientation - day long event
7/14			2	Dean (A. Adams) and Dept Chair (H. Williams)	Recruitment	Discussion of student employee hiring process for dept.
7/18			5	See attached sign in - 5 people	Training Function	All day training session for office employees regarding new school year
					elect	
					select	
		A			select select	
					select	
					select	
) / 5 - 2			select	
					select	
					select	
Totals		40	17	23 =Next month carryover		

Retain in departmental files each month.			
This log and its back up documentation are subject to audit.	Signature of Approving Authority	Date	