



****Form must be complete & submitted FOUR (4) WEEKS prior to event!****

Be as specific as possible on these details! Items not specifically listed/mentioned will NOT be provided as part of the compensation.

Performer/Speaker Name: _____ Event Date(s): _____

Performance Times (start & end): _____ Location (Building/Room): _____

Request Date: _____	Requested By: _____
Supplier/Vendor: _____	Email: _____
Address: _____	Phone: _____
City, State ZIP: _____	Committee/Group: _____
Email: _____	Event/Program Name: _____
Phone: _____	Program/Gift Account #: _____
Website: _____	\$ Split Details (if applicable): _____

Brief Description of Service (band, comedian, keynote speaker, etc.): _____

Payment Information:

Payment: \$ _____
(Check amount)

☐ PAYMENT IS **INCLUSIVE** OF ALL RELATED EXPENSES (meals, lodging, supplies, transportation). Performer is expected to make all arrangements and pay for **all** expenses.

Check payable to: _____

Address, City, State & Zip: _____

Special Arrangements: Please indicate below what additional items your group will pay for.

☐ **Airfare**
Airport -- Spokane / to & from
Date: _____

☐ **Hotel**
Hotel Name: _____
Check In Date: _____
Check Out Date: _____
Rooms: _____ # Beds: _____
Guests: _____ Bed Size: _____

☐ **Meals**
*meals paid at WA per diem rates
Submit Purchase Request
form for Purchase Order or
Pcard for Performer/Student
Meals
Attendee list is **required**.

☐ **Other, specify** _____

☐ multiple guests, room list attached

Other Comments/Notes: _____

Approvals	Print/Type Name	Signature	Date
Committee Chair or Finance Chair:			
Advisor:			

*****NOTE: If the performer/speaker provides their own contract/agreement, rider, also complete the [Contract Request form](#), then attach ALL documents to this form *****
Email ALL documents to getinvolved.finance@wsu.edu.