



LOUISIANA STATE UNIVERSITY

Louisiana State University
Office of Accounting Services
Accounts Payable and Travel
217 Thomas Boyd Hall

**REQUEST FOR APPROVAL – THE COOK HOTEL & CONFERENCE CENTER
LODGING – CONFERENCE ROOM RENTAL (To be invoiced to LSU)**

AS540

Request Date _____

- Check all that apply: Lodging – Complete section A; attach a copy of the approved Spend Authorization ECM and hotel confirmation.
 Conference Room Rental – Complete section B; attach a copy of the Lod Cook contract.

1	Hosting Individual or Group						
2	Department						
3	Contact						
4	Phone		Fax		E-mail		
5	Event Name				Event Date(s)		
6	Program	Project	Gift	Grant	Additional Worktags	PO#	SPA Approval
7	Event's Purpose/Benefit to LSU						
SECTION A – GUEST LODGING							
8	Visitor						
9	Room Type <input type="checkbox"/> Deluxe Room <input type="checkbox"/> 1-Bedroom Suite						
10	Check-in Date				Check-out Date		
11	# Nights		Daily Rate		Total Amount		Spend Category
SECTION B – CONFERENCE ROOM RENTAL							
12	Conference/Workshop						
13	Event Start Date		Event End Date		Audio/Video Amount		
14	# Days		Daily Rate		Total Amount		Spend Category
APPROVALS		Signature			Title		Date
Requesting Department							
Dean/Director or Dept Head/Chair							
Accounting Services							