

**Business Event Form**  
**Office of Attorney General**

NAME OF TRAINING/EVENT	
LOCATION OF TRAINING/EVENT	DATES ATTENDING
WILL LODGING BE PROVIDED? YES OR NO	IF NO TO LODGING, WILL EMPLOYEES BE CLAIMING LODGING EXPENSE REIMBURSEMENTS? YES OR NO
IF NO TO LODGING, IS A SPECIFIC LODGING FACILITY REQUIRED FOR THE EVENT? IF SO, PLEASE PROVIDE THE NAME OF THE FACILITY AND REASON FOR THE REQUIREMENT	
WILL MEALS BE PROVIDED? YES OR NO	IF YES TO MEALS, PROVIDE DATES AND MEALS THAT WILL BE PROVIDED (BREAKFAST, LUNCH, DINNER)
LIST ANY OTHER EXPENSES THAT MAY BE INCURRED AND FOR WHICH EMPLOYEES MAY REQUEST REIMBURSEMENT FOR :	
REASON FOR TRAINING/EVENT:	
LIST OF OAG TRAINERS AND ATTENDEES:	
APPROVAL SIGNATURE OF ORGANIZER/SUPERVISOR:	