

Controller's Office Florida State University

Payroll Services 5600A University Center Tallahassee, FL 32306-2391 Ph: (850) 644-3813 Fax: (850) 644-9403

CLUB USAGE LOG

From:	to	(Departments can send quarterly, if they prefer)
Employee Name:		
Employee ID:		
Department		
Name of Club		Membership Plan Type

	Busine	ss Use?	Purpose of Business
Date	Yes	No	(If business usage, indicate purpose, at least one person in attendance and that person's relationship to FSU. If more room is needed, continue on line below)
Ex: 6/3/19			Recruiting; Coach Smith - Godby High
Ex: 7/1/19			
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Total Days Used:	Days of Personal Use:	Days of Business Use:

Employee Signature	
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