**Black Hills State University**

**Business Office**

 1200 University St. Unit 9505

Spearfish, SD 57799-9505

Phone: 605.642.6821

Fax: 605.642.6055

**LODGING DIRECT BILL AUTHORIZATION**

*Requestor: Contact must be made with the vendor beforehand to confirm that direct billing is acceptable.*

**Hotel Name:**

**Hotel Contact: Phone Number or Email:**

**Guest Name(s):**

**FOP:**

**Arrival Date: Departure Date:**

**Number of Rooms: Room Rate:**

**Purpose of travel:**

**Black Hills State University is solely responsible for room charges and applicable taxes.**

**Any additional charges are the responsibility of the guest.**

**Direct payments to in-state hotels will be limited to current state rates for lodging.**

**Please direct the hotel to send the billing invoice(s) along with detailed room statements to the address listed above.**

**When submitting this form to the Business Office, please attach a copy of the approved travel request.**

**Requestor Name (Please Print):**

**Requestor Signature: Date:**

**Internal Business Office Notes:**

 **W-9 Needed: Yes No Approved By:**

 **Vendor ID Number: Date:**