

Entertainment Reimbursement

Instructions

Please complete	this form and	' attach all i	receipts. (Once completed,	please submit	this form t	o your
business office.							

Name:		Date:
Amount of Expense:	Reimburseme	nt Type:
Mailing Address:		
City:	State:	Zip Code:
Email Address:	Ph	one Number:
Account(s) to charge:		
Entertainment Type:		
Name of Prospect, Organization, or Student Group	o:	
Host Name:	Entertainm	ent Date:
Business Purpose Please provide a specific business purpose for the university to rein	mhurse this enterta	inment (i.e. husiness meeting recruitment semin

provide a specific business purpose for the university to reimburse this entertainment (i.e., business meeting, recruitment, seminar, etc.). Please be as detailed as possible about the nature of the event and what was purchased.

List of AttendeesYou may fill out the table provided or attach a complete list of attendees. If attaching a list, please include full names, their title, and their affiliation with the university.

Name (Last, First)	Title	University Affiliation	