

# ENTERTAINMENT EXPENSE REIMBURSEMENT REQUEST FORM

Payee Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

University I.D. \_\_\_\_\_ Total # of Attendees: \_\_\_\_\_

Total Amount Requested: \$ \_\_\_\_\_ Residential Address: \_\_\_\_\_

Account or Project to Charge: \_\_\_\_\_

Select Type of Event:

- Breakfast -- maximum allowed \$26/person
- Lunch -- maximum allowed \$45/person
- Dinner -- maximum allowed \$78/person
- Light Refreshments -- maximum allowed \$17/person

- Alcohol Beverages Served?  
(If yes, 'unrestricted' funding required)
- Yes
  - No

**Please state BUSINESS PURPOSE of event:**

Include: 1. Name of Dept.; 2. Name of Event; 3. Type of Event (workshop, conference, meeting etc.); 4. Date and Location of event;  
5. Purpose of the event or main agenda topic; 6. Comments if necessary; 7. Name of the official host;  
8. Certification of the official host that the expense is for University business (signed below)

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**Please list NAME & AFFILIATION (business relationship) of EACH attendee:**

('business relationship': occupation or other information relating to the person(s) entertained, including name, title, institution, or other designation, sufficient to establish business relationship to the payee and or UCLA):

	UCLA					Non-UCLA
	Faculty	Staff	Student	Spouse*	Colleague	Affiliation
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
						Total Attendees:

\* Reimbursement for expense of a spouse is allowable only if his/her presence serves bona fide business purpose

**Tape All Receipts To A Sheet Of Paper And Attach To This Form.  
Submit Completed Form With Receipts the Departmental Office Coordinator (Adriana Rosalez).**

\_\_\_\_\_  
Signature & Date