

ENTERTAINMENT REIMBURSEMENT

Name: _____ Date of Event: _____

Location of Event: _____ Guest's Name: _____

Department: _____

Breakfast: Lunch: Light Refreshment: Dinner:

Total Amount Claimed: _____ Alcohol portion, if any: _____

Funds to Charge: _____

Purpose of Event: (Be Specific)

All in attendance and their Affiliation:

Your signature: _____

P.I. approval signature: _____

* * * * *

Office Use Only:

FAU to charge: _____ **Analyst approval:** _____

Maximum rate:
Breakfast: \$26/person
Lunch: \$46/person
Dinner: \$78/person
Light Refreshments: \$18/person