## **ERSO ENTERTAINMENT REIMBURSEMENT OR VENDOR PAYMENT REQUEST**

"Entertainment" means expenditures for meals or light refreshments and related services (e.g., labor charges, room rental, equipment rental, decorations, flowers, and similar expenditures) incurred in connection with events that are primarily social or recreational activities in support of the University's mission. Form and receipts must be submitted within 45 days of expenditure (14-day to submit to Inranet)

PAYEE INFO												
Select One:			Vendor Payment Request				Reimbursement Request (to individual)					
Payee Name: Individual or Vendor Name						UCB Employee or Student ID:  (if applicable)						
Payee Address:												
Pay	ee Email:											
EVENT INFO												
EVE	NT TYPE		57233 University employee on travel status 57006 Visitors, Guests and Volunteers									
Please select one:			57002 Meals provided to students				57006 Prospective donors, employees, & s				students	8
				•			ı		Employee morale (a			-
			57004 Business Mtg Hospitality - Technical 57007 Employee morale (as an exception) 57005 Business Mtg Hospitality - Non-Technical Details on Event Type account codes: <a href="https://controller.berkeley.edu/financial-operations/entertainment/entertainment-account-codes">https://controller.berkeley.edu/financial-operations/entertainment/entertainment-account-codes</a>									
	nt Business	s Purpose						,				
(sp	ecific):											
EVENT LOCATION:			*EVEN	IT DATE:	Numbe Attende	Total Amount:		mount:	Cost Per Persor	n Meal T	уре	Campus Meal Limits
										Breakf	ast	\$31.00
*Fo	r multiple day	or meal eve	ents (on one	invoice), use	Meal Per Per	Meal Per Person Cost Calculator and submit with request.						\$54.00
	s this Entert					YES		NO	· <del></del>	Dinner		\$94.00
	there other oable to a Ver		elated to this	s event paid	by others or	YES	3	NO		Light Refresh	nment	\$22.00
	<b>ES</b> please pr I amount:	ovide the Ir	ntranet or B	earBuy reque	est IDs# and							•
	endee List											
		ontaining the na	me and title of p	participants, and t	heir occupation of	or group affiliation	n. in order	to establish the busi	iness-related relationship to t	he University. If it is	impractica	ıl to list each
Provide a guest list containing the name and title of participants, and their occupation or group affiliation, in order to establish the business-related relationship to the University. If it is impractical to list each guest based on the open nature of the event, the documentation need not include individual names and titles.												
List Participants and Affiliation -or- Open Invitation (attach announcement) and list host below to indicate they were present.												
	Name			Occupation/Affiliation				Name Occupa			pation/Affiliation	
1				Host (m	ust be in atte	t be in attendance)						
2							12					
3							13					
4							14					
5							15					
6							16					
7 8							17					
9							19					
10							20					
Host Certification												
			a ic a trua et	atement of de	nartment evn	ences and th	nat such	entertainment/ev	vent is relative to officia	I I Iniversity husin	nes Th	Δ2Δ
				University of		enses and ti	iat sucii			ii Offiversity busin	1033. 111	C3C
Offi	cial Host's S	ignature*: _				D	ate:	Off	ficial Host Name: auto fill from attendee list)			
					e Approver is t	he Host, phys	ical signa	ture on the form is	s not required.			
For	Departmen	tal Use On	ly (optiona	1)								
Authorizing Name & Title (Print):						Authorizing Signature:					:	
Authorizing Name & Title (Print)						Authorizing Signature:						:
Exc	eptional App	roval Name	& Title: Exception				onal Approval Signature:				Date	:
-	Account	Fund	Dept ID	Program	CF1	CF2	% or An	nount	Fund Desc.			
O A												
,,												