


MCB ENTERTAINMENT PAYMENT/ REIMBURSEMENT REQUEST
PAYEE INFORMATION

Name				Request Date	
Address			City/State		Zip
Email		Phone No.		Employee ID/SSN/EIN	

EVENT PURPOSE (provide a clear and detailed explanation for the purpose of the meal; must be for a bona fide campus business purpose)

EVENT INFORMATION

Date of Event		Event Location	
Alcohol?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Alcohol costs must be clearly identified on all receipts. Depending on funding source, alcohol may not be reimbursed.	

Meal type	Please check one box <i>(dollar amounts represent maximum per-person expenditures including tax/service)</i>		Attach all receipts showing meal details. Credit card receipts and any meals exceeding \$75 <u>must</u> be accompanied by itemized meal receipts. When entertainment costs exceed the per-person limits, pre-approval from the Dean is required. Some occasions and entertainment circumstances are considered exceptional and require both departmental and Dean approval. Please go to this link on the Travel site to view policy: http://travel.berkeley.edu/Ent/ExceptionalExpenditures.htm Submit your request to the Business Services unit (Purchasing) and they will forward to the Chair and Dean for approval.
	<input type="checkbox"/> \$26.00	Breakfast	
	<input type="checkbox"/> \$38.00	Lunch	
	<input type="checkbox"/> \$64.00	Dinner	
	<input type="checkbox"/> \$17.00	Light Refreshments	

Other Expenses (Room Rental, A/V,); explain:

Number of Participants		Cost per participant \$	
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TOTAL REIMBURSEMENT \$
PARTICIPANT LIST

Use a separate sheet of paper if necessary. Include individual's names and institution/organization affiliations. This list is necessary regardless of number of attendees. If it is an open event where it is difficult to name all attendees, you must provide the following as documentation: **1) the number of people you catered for AND 2) a general description of the groups or organizations invited, establishing their business relationship with the University, and link it to the business purpose of the event.**

GRANT OR FUND TO BE CHARGED

Account	Fund	Org	Program	Project	Flex	\$ Amount

Certification by Host I hereby certify that the above is a true statement of the expenses incurred by me, that such entertainment/meeting expenses were incurred for official University business purposes, and that I have submitted original receipts for expenses as required by University and departmental policy.

Host (please print name and sign) / Date	X
PI or Dept Approval Signature / Date	X
Accountant Signature / Date	X

PREPARER INFORMATION

Name		Phone No.		Email	
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