## Berkeley CNR

## University of California, Berkeley

## Entertainment or Event Authorization and Documentation

The following information is **required** for documenting entertainment expense requisitions and expenses charged to a **US Bank Event Planning Card (EPC)** in compliance with UCB EPC guidelines. Approving authorities and allowability of expenditures can be found in UCOP policy Nos. BUS-79 and BUS-43, Part 8. **SELECT PAYMENT METHOD:** 

PREPARER'S											
						ate: Phone:					
Department:					Email:						
EVENT INFOR											
BearBuy Item I	escription	n:									
Description of Event:											
Business Purpose of Event:											
MEAL EXPEN	SE INFO	RMATI	ON .	Attach a gues	st list for each r	neal expense	e				
								nt.			
	ent Date: Meal Type			Served? No				ype of Event:			
Vendor to be Paid			Comments			Reference No.		MT IN per berson Calc		TOTAL	
						AMT IN per					
Other Expenses Included in Per Person Calc			Comments			person Calc	N	•	1se TOTAL Campus Per I	Ponson Limits	
									Light hments	150% 200%	
								Refres	hments \$18	\$27 \$36	
								Br	eakfast \$26 Lunch \$45	939  952	
olain If Other Typ	e of Event	: Excep	otiona	al Entertainn	nent Requiring	Approval (ch	l leck all that a	pply):	Dinner   \$78	\$117 \$156	
		Spous	es/Pa	rtners En	nployee Morale- ilding Activity	Meal Ov	er Campus	$\mathbf{S} \square \square$	# \$ Include	. ,	
		in Atte	endan			$\neg$ Per Pers	on Limit	Att	endees Perso	n Cost/Ferso	
				Other			_				
		Univ	versi	ty Business P	urpose for Exc	eption:	Exp	olain OT	HER Except	ional Expense	
						'	<b>Total Eve</b>	nt Vend	or Expenses:		
				Amou	nt Assigned to a	Chartstring	(PREV P	AID + T	O BE PAID:		
					0	Amoun	t Unassig	ned to a	Chartstring:		
BFS CHARTST	RING DI	STRIB		)N			6		8		
ACCOUNT	FUND	DEPT		CHARTFIELD1	CHARTFIELD2	VENDOR	TOTAL (A Prev Paid Paio	+ To Be	AMT PREVIOUSLY PAID	AMT REQUESTED T BE PAID	
					EVEN	T TOTALS					
"I hereby certify that the by me, or with my appro of the University of	val of the use California	of my EPC and that	, withir such	the regulations entertainment/		t Card:			Date	2:	
administrative event was Host:	siness." Date:	Departmen	Name and Title:    Department Approval:  Date:    Name and Title:								
Name and Title					<u>Name and Tit</u>	le:					
Name and Title:	Signatures	(if required	):		Name and Tit	le:					
	•	-	):	Date:	<u>Name and Tit</u> Executive: Name and Tit				Da	te:	