This form should include / be completed for all expenses incurred for entertainment & hospitality regardless of whether a reimbursement will be processed (e.g. ProCard expenses.) All fields must be completed. One form for each event is required. Send completed form and supporting documents to the Disbursements Office for reimbursement. Departments not seeking reimbursement (for example, ProCard) must retain this form and supporting documents on file (subject to audit review).

UTSA Business Expense Form (BEF)

Date of Form

PAYEE INFORMATION

Payee Name

Payee UT EID

Dept. Contact Name

Dept. Contact Phone #

FUNDING INFORMATION

Funding Source(s) (Select from drop-down): Select one / Select one

Account #(s) To Be Charged

Account Title(s)

EVENT INFORMATION

Event Name

Explain Business Purpose (BELOW):

Date of Event | Time of Event | # of Attendees

Hosted while traveling on business? YES NO

Event includes alcohol? YES NO

Event off campus? YES NO

Official Guests / Participants Names	Business Affiliation
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

EXPENSE INFORMATION

Document ID #

Type of Expense	Amount
Select one	
Select one	
Select one	
Select one	
Select one	
SUBTOTAL (Excluding Alcohol)	$0.00
SUBTOTAL Alcoholic Beverages Only	
EVENT TOTAL	$0.00

When event exceeds 10 persons, use additional sheets or refer to attendees by a representative description for the group. If spouses are included, approval must be by VP, AVP or Dean. For flowers, indicate recipient's name and affiliation with UTSA. Cost per attendee (computed below) must not exceed maximum allowable per policy unless authorized by VP.

COST PER ATTENDEE: NaN

Current Limits Incldg Gratuity: $55/pp DINNER $25/pp BREAKFAST & LUNCH

ALLOWED EXPENSE DESCRIPTIONS

Use the following in the above fields for type of expense:

- Business Meeting - Breakfast
- Business Meeting - Lunch
- Business Meeting - Dinner
- Business Meeting - Lt. Refreshments
- Conference, Workshop or Seminar
- Employee Recognition (Do not use for Employee Gifts)
- Event Decorations / Invitations / Holiday Cards
- Event Paid by Participant Fees
- Flowers - Individual
- Hospitality to Official University Guests
- Meeting of a Learned Society or Organization
- On-the-Job Employee Meal
- Student Events/Student Oriented Meetings
- Table Sponsorship

EVENT HOST AND/OR INDIVIDUAL CERTIFYING PAYMENT

I (the undersigned) certify that the expense(s) included in this request for reimbursement was (were) incurred for the benefit of the university or respective funding agency, in connection with the performance of official university duties and not for personal use, in accordance with the University policy guidelines for Entertainment & Hospitality expenses. I certify that if there are other payees for this event that the total cost, including other payments is not more than the allowable rates.

NAME | TITLE

SIGNATURE | DATE

ACCOUNT ADMINISTRATOR — APPROVAL

NAME | TITLE

SIGNATURE | DATE

ADDITIONAL APPROVAL

For Office Use Only

OBJECT CODE

- 1323 - Official Occasions (use for Employee Recognition)
- 1324 - Conferences, Wkshps & Seminars
- 1327 - Business Meetings
- 1302 - Club Dues
- 1329 - Flowers Others - Individuals

REASON

- Exceeds Max Rates (VPBA only)
- Additional Approval Required from VP or Asst/Assoc Dean or VP
- Other: Explain

Amt of Exception Per Person Over Limit

Event Over $5,000 - Indicate Event Total

Examples: "University Advancement Office authorization for table sponsorship." "President/Provost authorization for club membership dues."

APPROVED BY:

NAME | TITLE

SIGNATURE | DATE

REVIEW BY:

DATE PROCESSED

PRINT