



## Addendum for Special Events

**Instructions:** Combine this form with your [One Card Application and Agreement](#) or [Card Maintenance Request](#) to add a non-official cost center/project for special events. Route completed form through DocuSign and send to UTSA Credit Card Administration (creditcards@utsa.edu). See [One Card](#) and [Business Related Hospitality and Entertainment Expenses](#) financial guidelines for details.

**Note:** Expenses for hospitality must be directly related to, or associated with, the active conduct of official UTSA business. Costs should be based on allowability (meets the Directly-Related Test or Associated Test per IRS regulations), availability of funds, benefit to UTSA, appropriateness of funding source, and reasonableness.

Prepared by: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

### APPLICANT INFORMATION

Applicant Name	Department	Dept ID	EmpID
Card Number (last 6-digits): _____	Default Cost Center _____	Phone _____	Email: _____

Purpose	Participants	Frequency	Cost per Event	Cost Center/Project	Annual Budget

### ADDITIONAL COMMENTS

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## AUTHORIZATION/APPROVAL SIGNATURES

Applicant Signature and Date:	
Supervisor Signature and Date:	
For Post Award Administration:	

**\*NOTE:** Requires each Department Manager's signature when expense is charged to a different cost center(s).

Department Manager Name	Cost Center	Dept ID	
Department Manager Name	Cost Center	Dept ID	
Department Manager Name	Cost Center	Dept ID	

## CREDIT CARD ADMINISTRATION USE ONLY

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_ Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

*Cost Center Name:* \_\_\_\_\_  
*Cost Center/Project:* \_\_\_\_\_  
*Fund:* \_\_\_\_\_  
*Function:* \_\_\_\_\_  
*Available budget:* \_\_\_\_\_  
*Dept Mgr Name:* \_\_\_\_\_

## SPECIAL EVENTS APPROVAL

Name: Asst Vice President Supply Chain/Designee      Signature & Date: \_\_\_\_\_