Economics Entertainment Reimbursement Request

Name _____________________________  EID _______________  Date of Event ________________

☐ Breakfast  ☐ Parking

☐ Lunch  ☐ Other (detailed receipt required)

☐ Dinner

Guest Name ________________________________________________________________
Guest Title ________________________________________________________________
Guest Affiliation ___________________________________________________________

Event ____________________________________________
No. in Attendance ___________________________________________________________
Amount _________________________________________________________________

UT Department Faculty Representatives: ________________________________________
                                                                                   ____________________________________________
                                                                                   ____________________________________________

Category:

☐ Seminar Speaker  ☐ Faculty Recruitment  ☐ Graduate Student Related

☐ Graduate Event Related  ☐ Conference Related  ☐ Departmental Event Related

☐ Consultant  ☐ Project Related  ☐ Grant Related

Attach detailed original receipt(s)! (Use a Paperclip please)