



HOSPITALITY, CAMPUS CLUB AND SPECIAL EXPENSE REIMBURSEMENT FORM

(used for faculty recruiting lunch and dinner reimbursements and for non-travel status meal reimbursements)

(DETAILED ITEMIZED RECEIPTS ARE REQUIRED)

Date: _____ Meal: _____ Reason: _____

* Justification (Business Agenda Topics):

Restaurant & City: _____

Amount to be reimbursed: _____

Meal charge(faculty recruiting only):

Charge meal to PS account string: _____ 1026-11108-4100-20234

Was alcohol served?: yes* no (* itemized receipt is REQUIRED for alcohol)

Alcohol charge (faculty recruiting only) :

Charge alcohol to PS account String: _____ 1701-11108-4100-20232-UMF0001596

The following faculty members attended:

- | | | | | | |
|-----------------------------------|-------------------------------------|-----------------------------------|-------------------------------------------|-------------------------------------|--------------------------------|
| <input type="checkbox"/> Banerjee | <input type="checkbox"/> He | <input type="checkbox"/> Karypis | <input type="checkbox"/> Meyer | <input type="checkbox"/> Schrater | <input type="checkbox"/> Yew |
| <input type="checkbox"/> Boley | <input type="checkbox"/> Hecht | <input type="checkbox"/> Keefe | <input type="checkbox"/> Mokbel | <input type="checkbox"/> Shekhar | <input type="checkbox"/> Zhai |
| <input type="checkbox"/> Carlis | <input type="checkbox"/> Heimdahl | <input type="checkbox"/> Knights | <input type="checkbox"/> Myers | <input type="checkbox"/> Srivastava | <input type="checkbox"/> Zhang |
| <input type="checkbox"/> Chandra | <input type="checkbox"/> Hopper | <input type="checkbox"/> Konstan | <input type="checkbox"/> Nadathur | <input type="checkbox"/> Terveen | |
| <input type="checkbox"/> Du | <input type="checkbox"/> Interrante | <input type="checkbox"/> Kuang | <input type="checkbox"/> Papanikolopoulos | <input type="checkbox"/> Tripathi | |
| <input type="checkbox"/> Gini | <input type="checkbox"/> Isler | <input type="checkbox"/> Kumar | <input type="checkbox"/> Roumeliotis | <input type="checkbox"/> Van Wyk | |
| <input type="checkbox"/> Guy | <input type="checkbox"/> Janardan | <input type="checkbox"/> McCamant | <input type="checkbox"/> Saad | <input type="checkbox"/> Weissman | |

Other U attendees: _____

Non U attendees (Business Relationship & Company Title):

Candidate name: _____

Certification: I hereby certify I have incurred the above expenses.

Submitted by: _____
(Signature)

(Date)

(Print Name)

Home Address: _____

Employee ID: _____

Departmental Approval: _____
(Signature)

(Date)

Approved - Dean or Designee: _____
(Signature)

(Date)