

**REQUEST FOR
MRL ENTERTAINMENT REIMBURSEMENT**

Date and Location of Event:

Purpose of Meeting:

Names and Affiliations of People Attending: (or attach list)

Reason for Food Expenditure: (why was food necessary at this event?)

Name and Dept. of Host (person to be reimbursed):

Email Address of Host:

Original itemized receipt attached? Yes No

If no, please complete "Declaration of Missing Receipt" and attach to this form.

Is alcohol included? Yes No

*****If yes, please indicate alcohol expenses on receipt.*****

Account to Be Charged (must be Gift or Unrestricted Funds)

Authorized Approval: Please sign and print name
