

Entertainment Reporting Addendum (Travel/Pro-Card)

Important: For full functionality, it may be necessary to download a copy of this form to your computer and open it with Adobe Reader or Acrobat Professional. To save a completed form, you may need Acrobat Professional. For technical and accessibility assistance, contact finaff-tech@ucsc.edu, for form questions, procard@ucsc.edu.

Instructions: Attach completed form and original itemized receipts to the Post Travel form or Pro-Card statement as appropriate.

Section 1: Event Information

Event Name:	<input style="width: 95%;" type="text"/>	Total Amount:	\$ <input style="width: 95%;" type="text"/>
Event Location:	<input style="width: 95%;" type="text"/>	Number of Participants:	<input style="width: 95%;" type="text"/>
Event Date:	<input style="width: 95%;" type="text"/>	Per-person Cost:	<input style="width: 95%;" type="text"/>

Food / Beverage Purchased: Breakfast Lunch Dinner Refreshments

State UC Business Reason for Event:

Section 2: Per-Person Rates And Top Level Criteria

Breakfast \$27.00	Dinner \$81.00	Top Level Approval Is Needed If: 1. Alcohol is present (not allowed for student events) 2. Per-person maximum rate has been exceeded 3. Spouse/family members of employees or guests attended 4. Cost is for tickets or includes a donation 5. Employee morale event
Lunch \$47.00	Refreshment \$19.00	

See the [Entertainment Guide](#) for more information.

ATTACH GUEST LIST: Attach a guest list containing the name and title of participants, and their occupation or group affiliation, in order to establish the business-related relationship to the University.

Section 3: Event Approvals

I certify that all meal and refreshment expenses were incurred for an official university business purpose.

Traveler/Cardholder Signature Required	Print Name	Email	Date
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Event Expense Certifier (EEC) Signature Required	Print Name	Email	Date
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Top Level Approval Signature (If Needed)	Print Name	Email	Date
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Section 4: Submit Information

Instructions: Attach completed form and original itemized receipts to the Post Travel form or Pro-Card statement as appropriate and submit as usual.