

Hospitality Expense Justification Payment Services

This form is to be completed and submitted with other supporting documentation (i.e., itemized receipt, event/meeting agenda or quote) for hospitality related expenses. For detailed information on allowable hospitality expenses and appropriate funding sources, please refer to the Hospitality Guidelines Note: For business meetings or events attended by CSUMB employees only, an event/meeting agenda is required to be included with the support documentation.

Department Information					
1.	Contact Name:	Email:	Phone:		
2.	Department:				
Payment Request Information					
1.	Payment Request Method: Personal Reimbursement Petty Cash	Direct Pay Procard	Purchase Order		
2.	What Fund will be used to pay the expense? Amount: \$				
3.	Vendor or Employee/Student Name:	lor or Employee/Student Name: Vendor ID or Emp/Std ID:			
Expense Description					
 2. 3. 	Type of Expense: Awards and prizes Promotional items Approved Vendor for Promotional Items Yes No Entertainment services Food and beverage If supporting documentation is not itemized, Claimant certifies that alcoholic beverages were <i>NOT</i> included in expenses. Event Name: Promotional items Yes No Other: Payee's Signature:				
4.	Event Date(s):	Event Location:			
5.	Describe the business purpose of the event:				
6.	Small Group- List names of attendees/recipients:	CSU Employee	Student	Guest	
7.	Large Group- Number of attendees/recipients Large Group- Provide general description of attendees/reattach a list.	ecipients, i.e. staff, faculty, studer	nts, community leaders, o	r	