

# Human Ecology Entertainment Reimbursement Request

Name \_\_\_\_\_

Date of Event \_\_\_\_\_

- Breakfast
- Lunch
- Dinner

- Parking
- Other \_\_\_\_\_

*\* Original Detailed Receipt Required*

Guest Name \_\_\_\_\_

Title \_\_\_\_\_

Affiliation \_\_\_\_\_

## Category:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Seminar Speaker        | <input type="checkbox"/> Faculty Recruitment | <input type="checkbox"/> Graduate Student Related   |
| <input type="checkbox"/> Graduate Event Related | <input type="checkbox"/> Conference Related  | <input type="checkbox"/> Departmental Event Related |
| <input type="checkbox"/> Consultant             | <input type="checkbox"/> Project Related     | <input type="checkbox"/> Grant Related              |

## UT Department Faculty Representatives:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Attach detailed original receipt**

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Staff Only: OOEF# \_\_\_\_\_  
Date Received \_\_\_\_\_  
Date Processed \_\_\_\_\_

Document # \_\_\_\_\_  
By \_\_\_\_\_  
Likely Pay Date \_\_\_\_\_