



**CVM  
Policies and  
Procedures  
Handbook**

**Subject:** *Entertainment Form*

**Section:** *Business Office*

**Number:** *3.02*

**Pages:** *3*

**Date:** *03/17/11*

**Replaces Policy Dated:** *06/03/85; 10/10/96*

**To Be Reviewed Yearly by:** *CVM Committee on Policies  
and Procedures*

**Source:**

**Cross Reference:**

**Entertainment Form**

**College of Veterinary Medicine**

Purpose:

This form is submitted by an employee to file for reimbursement of personal funds expended to conduct official University business in a public establishment.

No expenses may be charged directly to the College; all expenses must be paid by the employee, who then submits the reimbursement form.

Restrictions on Use:

1. The function must have a legitimate business purpose and must involve at least one non-University employee (example: interviewing a prospective employee).
2. Reimbursement is limited to \$25 per person per meal (including a reasonable tip if included on the receipt).
3. Reimbursement for entertainment in private homes will not be authorized.
4. University employees in a travel status will cover reimbursement for their own meals, transportation, etc., by travel voucher.
5. Liquor or cocktails are not reimbursable expense items.

Business Office

Receipts:

Itemized receipts are necessary in order for reimbursement to be made.

Itemized receipts should bear the restaurant's name and should be attached to the reimbursement form when it is submitted.

Completing the Form:

- Department: College of Veterinary Medicine
- Account Number
- Purpose: Examples - to interview prospective employee, consultant visit
- Nature: Examples - breakfast, luncheon, dinner, banquet. Also, the total dollar amount for which reimbursement is requested should be listed here.
- Signatures: The form should be signed by the employee requesting reimbursement, approved by department head/manager, and then forwarded to the Business Office.

Approved: Kent H. Hoblet

Kent H. Hoblet, Dean

8/19/11

Date

ENTERTAINMENT FORM

MISSISSIPPI STATE UNIVERSITY  
PERMISSION FOR EXPENDITURE OF FUNDS FOR  
OFFICIAL UNIVERSITY FUNCTIONS IN  
PUBLIC ESTABLISHMENTS

Form C-4

Department: \_\_\_\_\_ Commodities Acct. No.: \_\_\_\_\_  
FOAPAL

Staff member to be reimbursed: \_\_\_\_\_  
(Last name) (First) (Middle)

City where expenditure is to be made: \_\_\_\_\_

Names and Titles of Persons Involved: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Purpose of Expenditure: \_\_\_\_\_

\_\_\_\_\_

Date of Expenditure: \_\_\_\_\_

Nature/Amounts of Expenditure: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I certify that the above expense is necessary in order to conduct official University business that could not have been ac-complished otherwise.

Signed: \_\_\_\_\_

APPROVED:

Dept. Head: \_\_\_\_\_

Dean/Director: \_\_\_\_\_

Vice President: \_\_\_\_\_

- Note: (1) University Employees in a travel status will cover reimbursement for they- own meals, transportation, etc. by travel voucher.  
(2) Reimbursement for entertainment in private homes will not be authorized.  
(3) One copy of this form for each signer.  
(4) Paid receipts itemizing cost(s) to be reimbursed must be attached to voucher.