

# Entertainment & Events Request Official Occasion Expense Form



**INSTRUCTIONS:** Departments must complete all sections of this form at least 10 business days in advance as a request to hold an event, on or off campus. Receiving all signature approvals will consent the due diligence effort to get all contracts and agreements in order for the event. Submit form to your OOF box or [DellMedFinance@austin.utexas.edu](mailto:DellMedFinance@austin.utexas.edu) to be routed through the proper channels. \*If only submitting an OOF request, complete only Sections 1, 2, & 4.

**Section 1: Department Information** Required for all requests.

<b>Department:</b> Department within Dell Medical School.	<b>Requester:</b> Name of person completing the form. This will be the go-to contact for any questions regarding event.	<b>Date:</b> Date completing form.
<b>Account Number:</b> Must be local/gift/discretionary account. No AUF funding can be used for entertainment expenses.		<b>Payee:</b> If reimbursing an individual, indicate name and EID. If paying a company, indicate name of vendor. If paying a direct bill, indicate "for reconciliation only".

**Section 2: Event Information** Required for all requests.

<b>Event Name:</b> Summary of Event		<b>Vendors to be used:</b> List all companies to be paid for expenses incurred during event.		
<b>Event Date:</b> List specific date or date range of event. If blanket, input start & end date.	<b>Event Time:</b> Indicate beginning & end time of event.	<b>Event Location:</b> <input type="checkbox"/> HLB <input type="checkbox"/> SZB <input type="checkbox"/> DPRI <input type="checkbox"/> Other _____ Indicate location where event takes place, not the vendors to be paid. List all if more than one location. If event did not take place in Austin, TX, identify city and state.		
<b>Event Object Code:</b> Check one to indicate event type.	<input type="checkbox"/> Official Occasion/Large Event (1347)		<input type="checkbox"/> Administrative/Business Meeting (1347)	
	<input type="checkbox"/> Official Student Event (1309)		<input type="checkbox"/> Flowers or other Perishable Items for Individuals (1329)	
<b>Actual Cost:</b> Calculate total cost of event when submitting for payment.	<b>Average cost per Person:</b> Field is required* - see below.	<input type="checkbox"/> Average Cost per Person not required	<b>Name of Group attending if &gt;10:</b> If more than ten people participated, supply a general description of people that attended.	<b>Actual Number of Participants:</b> Indicate an actual number of attendees.
<u>Name</u>	<u>Title</u>	<u>Affiliation</u>	<u>Name</u>	<u>Title</u>
				<u>Affiliation</u>
List participants by name, title, and affiliation, if ten or fewer.				

**Purpose of the event:** Supply a detailed explanation of the purpose of the event including all parties involved along with a brief agenda. Must include why requested entertainment expenses are required.

**Benefit to the Dell Medical School and the University:** Supply a detailed explanation of how the event is expected to benefit the Dell Medical School and the University or the benefits actually derived from the event.

**Justification if cost per person is exceeded or if alcohol is primary expenditure:** \*The average per person entertainment limit is \$75 and includes food, alcohol, tax, and gratuity. The average cost per person is not required when there is a negotiated agreement with a vendor for a total package price that includes food and non-food expenses. The agreement/contract must be included with the payment voucher.

**Alcohol approval attached.**  
Required for all events serving alcohol.

**Section 3: Budget Information** Budget request for events must be completed at least 10 business days in advance. Only require for large pre-event requests. (>\$500).

<b>Total Requested Budget:</b> Indicate total amount requested for the event. Food, Space, AV and Other costs below should add up to this amount.		<b>Contracts/Agreements Required?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Indicate YES if event requires catering, venue rental, guest speakers, photography/videographer, or any other agreements.		
<b>Food Cost:</b> Should include all consumable good purchases including but not limited to catering, house accounts, grocery store trips with the pro-card, UTMarket orders, etc...	<b>Space Cost:</b> Cost of venue rental, on and off campus.	<b>A/V Cost:</b> Cost of all A/V rentals, supplies..	<b>Other Costs:</b> Indicate any other costs to hold the event (honorarium, facilities, parking, etc..)	

**Section 4: Approval Signatures** Required for all requests.

**A review of this proposal has been performed. Receipt of all signature will be shared with the Finance Office to begin the due diligence process. Finance will perform appropriate budget check and inform requestor of approval.**

<b>Requestor</b> Signature of the person completing the form.
<b>Admin. Delegate/Dept. Head</b> Signature to indicate consent of event. Follow approval matrix.
<b>Asst. Director for Special Events</b> Special events will required this level of approval for awareness and planning. Facilities will route request to Asst. Director.
<b>Facilities (if held at a Dell Med facility)</b> Facilities' approval is required depending on the nature of the event. Finance will route request to Facilities if required.
<b>Finance ( For events &lt; \$10,000)</b> Finance will vet, sign and send through proper channels if event is approved.
<b>Chief Administrative Officer (For events &gt; \$10,000)</b> Finance will vet and acquire signature approval for events >\$10,000.
<b>Additional Approval</b> Finance will vet and acquire signature approval for events over \$100K from the CBO and/or Dean. Exceptions are given on a case-to-case basis.