



The University of Georgia Foundation

Reimbursement of University Related Entertainment

- (1) UGAF Check Request Number: _____
- (2) Source of Funding: OneSolution Account #: _____
 OneSolution Account Name: _____
- (3) Amount to be Reimbursed: _____
- (4) Time, Date, and Place of Occasion: _____

- (5) University Related Business Purpose Served by the Occasion: _____

- (6) If Alcohol was served, please check to confirm the UGA alcohol policy was followed:
- (7) Listing of Individuals Entertained:

***If Academic VP or Dean is a participant, please obtain SrVPAA & Provost approval before submitting to Foundation**

Names or Categories or Guest List or Defined Group	Relationship to University
_____	_____
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Entertainment Approved By: _____
(Sign & Date)