UNIVERSITY OF ULSTER
ENTERTAINMENT EXPENDITURE CLAIM

Name : ..... Designation .....

Staff No : ..... Faculty .....

Date of Entertainment : ..... Place of Entertainment: .....

(Memo to be attached detailing reasons for entertaining outside the University.)

Purpose of Entertainment : .....

.....

Staff Present :.....

.....

Guests Present : .....

.....

Analysis of Expenditure Receipts must be attached - Credit Card Counterfoils are not acceptable.

	£
Charge to Account Code :	Total Claim

I certify that this expenditure was incurred solely on behalf of the University of Ulster.

Signed: ..... Date: .....

Claimant

Authorised By:

Signed: ..... Date: .....

Dean/Head of Department

For Rules Governing the completition of this form see pages 18 - 20 of Finance Expenses Policy and Procedures.