# BNN Administration Entertainment Reimbursement Form

<table>
<thead>
<tr>
<th>Host Name:</th>
<th>Host Affiliation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guest Name:</td>
<td>Guest Affiliation:</td>
</tr>
<tr>
<td>Receipt Total:</td>
<td>Net Total:</td>
</tr>
<tr>
<td>FAU:</td>
<td></td>
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<tr>
<td>Event Date:</td>
<td>Meal Type:</td>
</tr>
<tr>
<td>Event Purpose:</td>
<td>(Breakfast, Lunch, Dinner or Light Refreshments)</td>
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<tr>
<td>Event Location:</td>
<td></td>
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<tr>
<td>Additional Attendees (Attach separate sheet if more space is needed):</td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Title</td>
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<tr>
<td>Additional Comments:</td>
<td></td>
</tr>
</tbody>
</table>

**PI Signature Required for Reimbursements from Grant Fund Accounts**
(If payee is someone other than the PI)

*Note: Expense must benefit the research funded by this particular grant*