

EN	Event #	Req. #	Expenditures for Business Meetings, Entertainment, and Other Occasions				Event date dates vary
Guest/ Group	PhD Candidates, ECE Students, Faculty, and visitors			Event PhD Defense			
▼ Approvals Required & Event Types ► See Appendix B of BFB BUS-79							
1. All Types -- Approving Authority must authorize below or on the Blanket Authorization attached here or to individual invoices 2. CAPS -- Official Host certification also required 3. UNDERLINE -- all the above plus Additional Approval by High Level Designee are required							
<input type="checkbox"/> Business Meetings--use TEV on travel status <input checked="" type="checkbox"/> Programmatic Activities--students, volunteers <input type="checkbox"/> RECRUITMENT--including student athletes <input type="checkbox"/> <u>EMPLOYEE MORALE-BUILDING ACTIVITIES</u> <input type="checkbox"/> On-the-Job Meals --for convenience of UCSB <input type="checkbox"/> ENTERTAINMENT--prospective donors							
<input type="checkbox"/> ENTERTAINMENT--social but w/ underlying business purpose <input type="checkbox"/> ENTERTAINMENT--exceeding per person rates of Appendix A <input type="checkbox"/> ENTERTAINMENT--tickets <input type="checkbox"/> ENTERTAINMENT--spouse, partner <input type="checkbox"/> ENTERTAINMENT--includes cash donation/contribution							
CAMPUS CONTACT	DEPARTMENT NAME	MAIL CODE	PREPARED BY	EXT.	DATE PREPARED	NAME OF BUDGET TO BE CHARGED	
	ECE	9560	A. Aguirre	3716	6/13/2019	ECE Dept/General	

UNIVERSITY OF CALIFORNIA, SANTA BARBARA - ACCOUNTING SERVICES & CONTROLS - ACCOUNTS PAYABLE, MAIL CODE 2040

Blanket EVENT AUTHORIZATION by Approving Authority

F-5 ENB- 5/2009

► Use **ORIGINAL** to obtain blanket authorization for an event that has more than one occurrence (f. ex. continuing programmatic activity) or requires more than one disbursement (f. ex. catering invoices and reimbursements).

► Attach **COPIES** of this signed authorization to each vendor invoice or Payment Request.

► Obtain approval to disburse and any Host certification required on this copy or on the attached invoice or Payment Request

Date copy submitted for disbursement	Vendor (per attached invoice) OR Payee (per attached Payment Request)	Type of authorized event expense submitted	Cost per person or total costs exceeded?	Amount of attached invoice or Payment Request
			<small>If YES, attach reauthorization</small>	

Some services (catering, hotels, etc.) require contracts, all of which must FIRST be either executed or approved by Business Services or Purchasing -- no exceptions

L	Account	Fund	S	Obj Code	Cost Center	Cost Type	Project	AMOUNT	TX
▶ 8	██████████	██████████	3	7250			██████████	\$450.00	----- -----

DESCRIPTION, business purpose ▼

▲ Attach [Multiple Distribution Coding Block](#) if needed

TYPE OF EXPENSE: Breakfast Lunch Dinner Light refreshments Other: _____

Number of participants: 25 List names, titles, occupations or group affiliations establishing business related relationships:

PhD Candidate, department host (faculty member), ECE students, faculty members, visitors and researchers

Event Date: dates vary **Location of the event:** Locations vary; July 1, 2019 - June 30, 2020

Business-related nature of the occasion or purpose of the event:

ECE Seminar/PhD Defense: estimating 15 events @ \$30 each. Light refreshments will be provided to allow the meeting to continue without a break.

Cost per person: \$1.20 **Justification of any exceptional expenditures, including exceeding Appendix A limits:**

Local exceptions per attached documentation

▶ Unallowable expenditures are not reimbursable.

▶ Exceeding 200% of limits requires Chancellor approval.

▼ See Appendix B, Approval of Expenditures, page 23 of [BFB BUS-79](#)

TOTAL SPEND AUTHORIZED

Amount not to exceed: **\$450.00**

I sign as the **Approving Authority**, an individual who has been delegated written authority to approve expenditure for meals, light refreshments, and other amenities as described within [BFB BUS-79](#).

I authorize the above entertainment/hospitality expenses to be incurred for an official University business purpose in compliance with University policy and fund source allowability.

I further authorize an approver with signature authority over the above budget(s) to approve disbursement of expenses incurred for this event, under this authority, by attaching a copy of this signed authorization to every invoice and Payment Request.

Chair's Signature

6/14/19

Signature
Nadir Dagli, Chair of ECE
Print (or type) name and title

Date

I sign this copy as the Approver to disburse the attached expense, acting within the Approving Authority's blanket authorization for this event.

Signature _____ Date _____

Print (or type) name and title _____

OFFICIAL HOST: I was present and certify these entertainment/hospitality expenses were incurred for an official University business purpose.

Signature _____ Date _____

Print (or type) name and title _____

ADDITIONAL APPROVAL BY HIGH LEVEL DESIGNEE -- Chancellor or his designee. State funds cannot be used.

Signature _____ Date _____

Print (or type) name and title _____

Submit ORIGINAL form to Accounting -- Attach original receipts. For vendor enclosures such as contracts, agreements or orders, please enclose both the original and a file copy for image archiving.

RETENTION - Accounting: 5 years PLUS Federal contract requirements.