The University of Georgia Foundation

Clear Form

Reimbursement of University Related Entertainment

(1) UGA Foundation Request Number: _____

(2) Source of Funding: Fund #: _____

Fund Name: _____

(3) Amount to be Reimbursed: _____

(4) Time, Date, and Place of Occasion: _____

_____

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

_____

(6) Listing of Individuals Entertained:

Names or Guest List or Defined Group	Relationship to University
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Authorized Signature: _____ Date: _____