



Employee Hosting Report Request

Please note that fields are not character limited, however only visible characters will come through to the SSC. Enter additional comments in the notes section, or attach another sheet of paper to this form.

Employee Information

Uniquename:	Approver Uniquename:
	Shortcode:

Date of Event:	Type of Hosting:
Select Type of Report:	
Was there alcohol? Yes No	

Vendor Information

Vendor Name:	City:
	State:
	TOTAL Amount:

Business Purpose Information

Business Purpose:

For more information on university policies and guidelines, see [UM SPG 507.10-1](#) and [Finance's website](#).

Attendee Name(s):	Title(s):	Affiliation(s):

****If more than 10 people attended your event, attach a list with the same column headers**

Please attach all required receipts

NOTES: