

**Great Basin College**  
**Host Expense Documentation and Approval**

(MUST be attached to the request for payment form or pcard statement with original receipts)

Date and Time of Event:

Name and Description of Event:

Location of Event: (City & State)

**Occasion/Other**

☐ Breakfast

☐ Lunch

☐ Dinner

☐ Snacks for Meeting

☐ Non-Food – Please specify:

**REQUIRED – Names of Individuals Hosted/Attended and check box if GBC Employee**

**Name & Business Relationship**

☐ 1

☐ 2

☐ 3

☐ 4

☐ 5

**Name & Business Relationship**

☐ 6

☐ 7

☐ 8

☐ 9

☐ 10

If more than 10 participants are being hosted, provide an explanation in lieu of names including event description and the types of attendees (faculty, staff, community members, students, parents, donors, etc.)

If all attendees are GBC Employees, provide justification of event & attach meeting agenda, if applicable.  
(see NSHE Procedure Manual, Chapter 5, Section 1)

**Approval and Payment Method**

Department: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Payment Method: ☐ Employee Reimbursement ☐ Vendor Payment DPO# \_\_\_\_\_  
Purchasing Card Last 4 digits # \_\_\_\_\_

Approved by: \_\_\_\_\_  
(Print Name of Vice President or Higher Authority)

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_