

**COMMUNITY COLLEGE OF SOUTHERN NEVADA  
HOSTING EXPENSE CHECKLIST  
(MUST BE ATTACHED TO REQUEST FOR REIMBURSEMENT)**

1. Dated Vendor Invoice/Receipt attached Yes\_\_\_\_\_ No\_\_\_\_\_

2. Business Reason for Hosting Expenditure

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3. Location of Hosting event (if not indicated on the receipt) \_\_\_\_\_

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4. Who is being hosted? (See descriptions outlined below.)

A. If hosting 20 persons, or less, all names must be included:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

B. If hosting 21 or more individuals, a statement, or some evidence of the number of people who attended.

C. If participant funded, (i.e., food is included with ticket price), provide evidence that the cost includes the hosting expense (for example, a copy of the ticket, informational flyer for the event, etc.)

5. Valid payment document is attached Yes\_\_\_\_\_

Host expenditure is charged to an "8230" account Yes\_\_\_\_\_

Approval: Department Manager Yes\_\_\_\_\_

Division Vice President (mandatory) Yes\_\_\_\_\_

Note: State Accounts (with a prefix "81\_\_") CANNOT be used for payment of host expenditures

Soft Money Accounts (with a prefix "8223") CANNOT be used to pay for food.

If there is additional information that you feel will be helpful in processing the referenced request for reimbursement, please attach the explanation to this form and the accompanying payment request.