SPORTS TICKET REIMBURSEMENT FORM

Expense Report for Sporting Event Attendance

EMPLOYEE INFORMATION

EMPLOYEE NAME

DEPARTMENT

EMAIL ADDRESS

SUBMISSION DATE

EVENT & PURPOSE DETAILS

EVENT / GAME NAME

DATE OF EVENT

VENUE / STADIUM NAME

BUSINESS PURPOSE / CLIENT NAME

DETAILED DESCRIPTION / JUSTIFICATION

TICKET & EXPENSE BREAKDOWN

DESCRIPTION (SECTION / ROW / SEAT)	QUANTITY	UNIT PRICE	TOTAL COST
		Grand Total:	

☐ I have attached original ticket invoices, booking confirmations, or receipts as proof of purchase.

Employee Signature

DATE

Manager / Approver Signature

DATE