# Spouse/Family Member Expense Travel Request Form

- **Executive Council Members** – Section I must be completed. Complete Section II if documenting a bona fide business purpose.

- **All other employees** – Section I must be completed and properly approved by your budget department head and divisional vice president under Section III before the expense is incurred. Complete Section II if asserting a bona fide business purpose.

Please do not complete Section II of this form if no bona fide business purpose is being claimed, and attach a copy of this Form to a copy of your Expense Report and submit to the Payroll Office.

## Section I.

<table>
<thead>
<tr>
<th>Employee Name/Title (please print)</th>
<th>Spouse/Family Member Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel Location(s)</td>
<td></td>
</tr>
<tr>
<td>Travel Dates</td>
<td>Expense Amount</td>
</tr>
</tbody>
</table>

## Section II.

Please document the claimed bona fide business purpose as clearly and as detailed as possible in the space provided taking into account the factors given under the Baylor Travel and Entertainment Policy. The divisional vice president is responsible for reviewing the information given and determining if a bona fide business purpose exists.

1. **Business purpose for employee’s trip/entertainment:**

   ________________________________________________________________

   ________________________________________________________________________________________________

   ________________________________________________________________________________________________

2. **Employee’s dominant business need for spouse/family member(s) presence:**

   ________________________________________________________________

   ________________________________________________________________________________________________

   ________________________________________________________________________________________________

3. **Function/Event attended by spouse/family member (attach event/meeting agenda, letter or invitation requesting that spouse attend, other documentation regarding event):**

   ________________________________________________________________

4. **Actual duties/services performed by spouse/family member at function/event:**

   ________________________________________________________________

   ________________________________________________________________________________________________

   ________________________________________________________________________________________________

   ________________________________________________________________________________________________

5. **Percentage of time actually spent by spouse/family member in performing above-described duties/services:**

   ______

   ________________________________________________________________________________________________

   ________________________________________________________________________________________________

## Section III.

<table>
<thead>
<tr>
<th>Employee Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Budget Department Head Approval</td>
<td>Date</td>
</tr>
<tr>
<td>Divisional Vice President Approval</td>
<td>Date</td>
</tr>
</tbody>
</table>

[ ] Divisional Vice President -- Please check box if bona fide business purpose established in Section II. If not established, please forward a copy of the Expense Report with a copy of this Form to the Payroll Office.