

**Authorization Request Form  
Employee Spouse Expense**

Employee Name: \_\_\_\_\_

Employee Banner ID: \_\_\_\_\_

Spouse Name: \_\_\_\_\_

Event/Activity: \_\_\_\_\_

Date of Event/Activity: \_\_\_\_\_

Cost: \_\_\_\_\_

FOAP: \_\_\_\_\_

Business Purpose: \_\_\_\_\_

\_\_\_\_\_

Per IRS Publication 15B & Publication 463 spousal expenses may be taxable to the employee. By my signature below, I acknowledge that I am aware any amounts paid by the University for spouse expenses may be reported on my W-2.

\_\_\_\_\_  
Employee Signature\_\_\_\_\_  
Date**Approve** **Disapprove** \_\_\_\_\_  
Print Manager Name\_\_\_\_\_  
Manager Signature\_\_\_\_\_  
Date**Approve** **Disapprove** \_\_\_\_\_  
Print Vice President Name\_\_\_\_\_  
Vice President Signature\_\_\_\_\_  
Date**Comments:**\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attach approved form to Concur expense report (if applicable), and submit a copy of completed form to: Payroll Supervisor, PRK-257 for determination of taxability.

Taxable Non-Taxable