

AUTHORIZATION FOR EXPENDITURE

DATE OF REQUEST: _____

TO: _____

FROM: _____

POSITION: _____

POSITION: _____

DEPARTMENT: _____

AGENCY/DEPT.: _____

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

TELEPHONE: _____

TELEPHONE: _____

This is a formal request for a single bank withdrawal/expenditure out of the below individual's personal funds in excess of amounts stipulated in the "Policy for the Management of Personal Funds" and/or the individual's personal financial plan (refer to page 1 of this Appendix for a summary on authorizations for expenditures/bank withdrawals).

INDIVIDUAL'S NAME: _____ **ADDRESS:** _____

CURRENT BALANCE IN ACCOUNT(S): _____

	Item to be Purchased	Estimated Cost	Reason for Expenditure
ITEM #1			
ITEM #2			
ITEM #3			
ITEM #4			
ITEM #5			

Signature for Approval: _____ Date Signed: _____

Signature for Non-Approval: _____ Date Signed: _____