



## **PAYMENT AUTHORIZATION**

Please attach to each invoice, statement, or expense form. Place in mail slot for Treasurer. Thank you.

**Date:**

**Amount:**

**Payable to:**

**For:**

**Charge to Account: #**

**Authorized by:**

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**Below for office use**

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*Date Received:*

*Charge to Account #*

*Treasurer:*

*Date processed:*