

*Parish Name*

**Authorization for Expenditure**

This form is to be filled out for all projected expenses that are not covered in the annual budget or which may exceed the amount budgeted for a category. After an authorized expenditure has been made, **this form is to be submitted to the treasurer with invoice or receipts attached.**

Individual requesting authorization:

Amount requested:

Purpose of the expenditure:

Signature of Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

Committee Authorizing Expenditure: \_\_\_\_\_

Signature of Committee Chairperson: \_\_\_\_\_ Date: \_\_\_\_\_

If receipts are attached, the check should be made payable to \_\_\_\_\_

For Treasurer's Use Only

Check #: \_\_\_\_\_ Payee: \_\_\_\_\_ Date: \_\_\_\_\_ Account : \_\_\_\_\_