 ORG NAME Internal Expense Authorization

**PAYEE / VENDOR NAME** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**🞎 Credit / Debit**

**Card Transaction**

Card XX- \_\_ \_\_ \_\_ \_\_

**Expense**

**Approved by:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Requested by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date check\* is needed \_\_\_\_/\_\_\_\_/\_\_\_\_ **🞎** NA

**🞎** Mail to vendor **🞎** Return to person requesting

*Invoice, Receipt, or Other Back-Up Documentation with Vendor info must be attached. For new contractors attach completed W-9.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Purchase** | **Account**  **## Name\*** | | **Amount** | | **Notes of Explanation**  **MEMO / Item** | | **Grant** (Customer/Job) | **Activity Class\*** |
|  |  | |  | | |  |  |  |
|  |  | |  | | |  |  |  |
|  |  | |  | | |  |  |  |
|  |  | |  | | |  |  |  |
| \*Refer to COA / Class List | |  | |  | | **Total Requested:** |  |  |

Coding approved by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *\*Or online payment*

 ORG NAME Internal Expense Authorization

**PAYEE / VENDOR NAME** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**🞎 Credit / Debit**

**Card Transaction**

Card XX- \_\_ \_\_ \_\_ \_\_

**Expense**

**Approved by:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Requested by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date check\* is needed \_\_\_\_/\_\_\_\_/\_\_\_\_ **🞎** NA

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Coding approved by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *\*Or online payment*