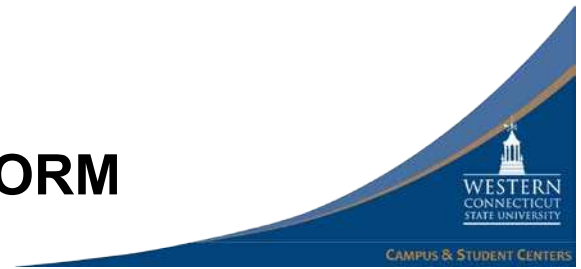


PAYMENT AUTHORIZATION FORM



This form must be used to authorize payment for items purchased through a purchase order or for services rendered through a PSA/Honorarium. This form must be received by the Student Activities Fiscal Assistant (SC 220) within five (5) days of the receipt of the items or completion of the PSA/Honorarium service.

(A) Organization Information:

Name: _____

(B) Type of Expenditure:

- Purchase Order #
- PSA/Honorarium #
- Other
(Attach supporting documents)

(C) Mailing Instructions:

All payments will be mailed unless other instructions are indicated.

Other Instructions: _____

(D) Amount to Pay

(E) Required Signature

I certify that the items were received per the purchase order or that the requirements of the PSA/Honorarium were met.

_____ Date _____
Treasurer or President

_____ Date _____
Verification

_____ Date _____
Student Activities Fiscal Manager

For Cashier Use Only

Date Paid ____ / ____ / ____ Check Number: _____

Vendor Invoice Number: _____ Date _____

1099 Code _____