



# AUTHORIZATION FOR PAYMENT

Vendor \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date	Item/Service Purchased	Purpose	Amount	Code
<b>TOTAL</b>				

Submitted by: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Submitter's Signature: \_\_\_\_\_ Date \_\_\_\_\_

<b>MoTAS Use Only</b>		
Approved by: _____		Date _____
Title: _____		
Code: _____	Chk# _____	Paid on: _____