



CO-SPONSORSHIP PAYMENT AUTHORIZATION

Date: _____

I hereby authorize the _____
(Department, club or council name)

to process transactions in relation to the _____
(Event) which we are

co-sponsoring. The council may initiate charges up to a total

amount of _____ Expenditures should be charged to the appropriate

Account _____ Fund _____ Organization _____ Program _____ Project,

and copies of all forms should be forwarded to me.

Authorized by:

Print name and title/position

Signature

Location **Department (if different from above)**

****For office use only****

Council
Account _____ Fund _____ Organization _____ Program _____ Project

Total charges: \$ _____
