Authorization for Expenditure

For further information, see APM 1-6.

Employee Name:_____

Date:_____ Agency:_____

Food/Meals: I request approval to spend in excess of $100 for the following:

Estimated expenditure: $_____

Flowers/Commemoratives: I request approval to make the following purchase using City of Madison funds:

Estimated expenditure: $_____

_____ _____

Department/Division Head Approval Account Number

_____ _____

Mayor's Office Approval Date

Please submit the approved form along with your p-card transaction or requisition in Munis, along with original detailed receipts.