AUTHORIZATION FOR PAYMENT | WARRANT REPORT

The PTA Treasurer will please pay the following on order: **NAME OF PTA/PTSA: _____**

DATE OF CHECK	CHECK #	PAYABLE TO	BUDGET LINE ITEM	AMOUNT	NOTES

Total to Be Ratified:	
Total to Be Paid This Date:	
Total of This Warrant:	

PAYMENTS TO BE RATIFIED

THIS IS TO VERIFY THAT THE ABOVE ITEMS WERE APPROVED:

_____ _____ _____

President ***Date*** ***Meeting Date*** ***Recording Secretary***

Check # _____ to Check # _____