

**Western Arizona Council of Governments**

**Check Authorization**

**PAY TO:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FEI #:

| <b>Invoice #</b>             | <b>Description</b> | <b>Charge to Program &amp; Account #</b> | <b>Amount</b> |
|------------------------------|--------------------|--|---------------|
|                              |                    |  |               |
|                              |                    |  |               |
|                              |                    |  |               |
|                              |                    |  |               |
|                              |                    |  |               |
|                              |                    |  |               |
|                              |                    |  |               |
| <b>TOTAL AMOUNT OF CHECK</b> |                    |  |               |

**Initial**

\_\_\_\_\_

Purchase procedure compliance with

\_\_\_\_\_

Checked accuracy of all arithmetic on invoices

\_\_\_\_\_

Ascertained that good or services have been received

\_\_\_\_\_

Prepared check authorization form

Check #: \_\_\_\_\_

Program Director: \_\_\_\_\_

Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_