



**Instructions**

1. Only **1 Check per form** & **1 Vendor per form**
2. Vendor Bills must be submitted with this form within 10 days of receipt of billing.
3. Committee/Officer expenses must be submitted within 30 days of event.
4. Mail completed form & attachments to Treasurer.
5. Original invoice from Vendor must be attached.

# Member Meeting/Education Event Bill Authorization Form

Event  Meeting Date  Invoice Date (Vendor)  Date Prepared

Your Name

Vendor Name (Leave Blank if Committee Expenses)

**Mail Check To:**

Address

City  State  Zip

Phone Number (for any questions)

**Make Check Payable To:**  Member  Vendor

**MEAL Charges** Meal Service  # of Guests  Total Meal Cost

	# Guests	Amount	Account	Program
Speaker Meals	<input type="text"/>	<input type="text"/>	Professional Fees: Travel	
Membership Committee Meals	<input type="text"/>	<input type="text"/>	Meals & Entertainment	Membership
President's Budget Meals	<input type="text"/>	<input type="text"/>	Meals & Entertainment	President's Budget
Admin Meals	<input type="text"/>	<input type="text"/>	Meals & Entertainment	Administration
Other Meals	<input type="text"/>	<input type="text"/>	Meals & Entertainment	<input type="text"/>
Net Meeting Meals <i>Paid by registration</i>	<input type="text"/>	<input type="text"/>	Lunches & Dinners	

<b>AUDIO VISUAL Charges</b>				
Total A/V Charges	%	Amount	Account	Program
Speaker Use	<input type="text"/>	<input type="text"/>	Rental: Equipment	
Membership Promotion	<input type="text"/>	<input type="text"/>	Rental: Equipment	Membership

<b>OTHER Charges</b>	Amount	Account	Program
Other <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**TOTAL BILL**

\_\_\_\_\_  
Your Signature Date

\_\_\_\_\_  
Committee Chairperson or COG Date

*The signature of above must counter-sign before the payment of any invoice or reimbursement*

- Distribution**
- Treasurer
  - Education Chair
  - Membership Chair
  - Monthly Meeting Chair
  - President Budget
  - Other (Specify)
- 

<b>BILL</b>	<b>PAID</b>
Date <input style="width: 80px;" type="text"/>	Date <input style="width: 80px;" type="text"/>
Entered <input style="width: 80px;" type="text"/>	Check No. <input style="width: 80px;" type="text"/>