

SAN GABRIEL MOUNTAINS CHAPTER  
California Native Plant Society

**PURCHASE/PAYMENT AUTHORIZATION FORM**

Required for all purchases or payments that are not routine expenditure  
Please submit completed form to the Treasurer

Purchase from/Payable to: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Purpose: \_\_\_\_\_

Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL Amount: \$ \_\_\_\_\_

This is routine expenditure:                      Yes                      No

Board approval:    At board meeting    By email    By telephone    Other

If not at meeting, identify approvers: \_\_\_\_\_  
\_\_\_\_\_

Board Approval Date: \_\_\_\_\_

Signature of one approver: \_\_\_\_\_ Date: \_\_\_\_\_

Date Paid \_\_\_\_\_ Check No. \_\_\_\_\_