

UNIVERSITY OF LA VERNE

Effective 7/1/2015

Accounts Payable Signature Authorization Form

(Authorizes individuals to approve check requests, expense reports and requisitions)

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Fund & Organization # (12 digits total)	Department Name or Club Nam	e Director's Name or Advisor's Name
Individual's Name	Individual's Title	Signature
(typed or printed)	(typed or printed)	Signature
(typed or printed)	(7)	
		Approvers that are not Senior Management can approve up to \$5,000.
		If over \$5,000, Senior Management approval is required.
Approved by:	Da	ate:
Approved by: (REQUIRED)		ue.
Club Advisor or Student Life Director/Assoc. Director		

Please return this form to the Accounts Payable Department For questions, please call ext. 4111 or 4112.

* This form must be updated whenever there are changes in authorized signatures.

** Please note that clubs require a minimum of two officers signatures in addition to their advisor.

Accounts Payable Office:

1574 Arrow Hwy, Suite I La Verne, CA 91750