



# Kiwaniis®

CLUB OF LINCOLN, NEBRASKA - LINCOLN CENTER

## Expenditure Authorization Form

Date Completed \_\_\_\_\_

To: Treasurer; Monica Geng, 2323 D St. #7, Lincoln NE 68502  
Email [mgeng16@gmail.com](mailto:mgeng16@gmail.com) (402) 480-4962

From: \_\_\_\_\_  
(Committee/Person requesting) (check one : \_\_Admin | \_\_Service - \_\_404 \_\_KK \_\_mem)

Attach an itemized statement for and authorize payment for the following:

Payment amount: \$ \_\_\_\_\_

Check Payable to: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Due date (if known): \_\_\_\_\_

Description of project and expenditure (or budget item title):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
(originator's signature) (date)

\_\_\_\_\_  
(authorized by signature) (date)

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**Following section for office use**

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

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

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

AcctCategory \_\_\_\_\_

Fund: \_\_\_\_\_ Administrative

\_\_\_\_\_ Community Service

\_\_\_\_\_ 404 or K-Kids Acct