

SPENDING AUTHORIZATION FORM

Pursuant to Whitestown Ordinance No. 2009-10, all purchases over \$5,000 must be preapproved by a body having authority to approve claims.

Name of Requestor	:	
Total Amount Requ	uested:	
General Description	n of Purchase (Attach addi	tional materials as appropriate):
	stor:Dominic C	ornett
	Office Verification:	
Sufficient fo	unds are available in the b	udget line numbers set forth above for the purchase
amount requested a	bove:	
Signati	ure of Clerk-Treasurer Des	ignee:
		Name:
Board Approval:		
On	, the	of the Town of
Whitestown approv	ved the above requested spe	ending authorization in an amount not to exceed
\$	·	
		Signature of Board President or Secretary

^{*}All payments must follow applicable claims approval procedures.

^{**}Requestor is responsible for ensuring any applicable bidding procedures (statute and/or ordinance) are followed.