

New Zealand Miniature Horse Association Inc

Ref# _____



PAYMENT AUTHORISATION

Name: _____ Date: _____

Address: _____

I hereby authorise the following/attached invoices for payment:

Vendor / Supplier	Invoice Number	Item & Reason for Expenditure	Budgeted Item	NZMHA Cost Centre eg. Tinytales, Hi-Points	Amount GST Inc.

Signed: _____

Position Held: _____

Approved: _____

Paid: _____
Cheque Number: _____

Tax Invoices MUST BE Attached

Position: _____

Date: _____

Note: ALL Expenditure MUST BE Authorised by at least two of either the President, Vice-President, Secretary or Treasurer. Failure to obtain authorisation may result in you being personally liable for the account.

- Ensure you split the invoice up across the appropriate nzmha cost centres
- Ensure you include a reason for all non-budgeted expenditure
- Ensure you attach invoices or supporting paperwork – no payment will be made without paperwork

