

PPA Payment Authorization Form

Please use this form if you authorize an expenditure which is being billed directly to PPA.

Name: _____

Phone Number: _____

PPA Committee/Event: _____

Committee Chairperson: _____

Signature: _____ Date: _____

Name of company/agency: _____

Description of work/product and cost:

Forms should be submitted to the 2011-2012 PPA Treasurer:

Ann Lenzen

2750 Indian Hill Rd, SE

Cedar Rapids, Iowa 52403