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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EOC Expenditure Authorization Form** | | | | | | | | |
| **Event:** | | | | **Date:** | | | | **EAF#:** |
| **EMCR Task #:** | | | | **Time:** | | | |  |
|  | | | | | | | | |
| **Requesting Organization/Community:** | | | | | | | | |
| **Authorized Representative:** | | | **Name:** | | | | **Location:** | |
| **Telephone:** | | | **Fax:** | | | | **Email:** | |
| **Description of Expenditure:** (include nature of goods and/or services being acquired/provided, desired outcome, location, date/time planned…) | | | | | | | | |
|  | | | | | | | | |
| **Amount Requested:** | |  | | | **Expenditure**  **Not to Exceed:** | |  | |
|  | | | | | | | | |
| **EOC Approvals** | Approved for Processing by: | | | | | Expenditure Request Approved by: | | |
| Position: | | | | | Position: EOC Director (or designate) | | |
| Date/Time: | | | | | Date/Time: | | |
|  | | | | | | | | |
| **PREOC Approvals** | Approved for Processing by:  Not Approved | | | | | Expenditure Authorized by: | | |
| Position: Operations Section Chief | | | | | Position: PREOC Director (or designate) | | |
| Date/Time: | | | | | Date/Time: | | |
| **Distribution:**  EOC Director  PREOC Director  EOC Operations Section  PREOC Operations Section  EOC Planning Section  PREOC Planning Section  EOC Logistics Section  PREOC Logistics Section  EOC Finance & Admin Section  PREOC Finance & Admin Section  Other:       Other: | | | | | | | | |
| **Comments:** | | | | | | | | |