



DBFA PROGRAM EXPENSE PRE-APPROVAL FORM

Pre-Approval #	(to be completed by Treasurer or Exec Director)		
Officer/Board Member/ Committee Chair/ Volunteer/Staff Responsible:			
Project/Program Name:			
** If a budget is available, it may be stapled to this form. If no budget is available, please complete the Detailed Costs items below **			
Total Project/Program Amount	\$ _____		
Description:			
Provide Detailed Costs	Item/Service	Cost (or estimate)*	Vendor (if known)
*To the extent feasible, be sure to get price quotes/bids from more than one vendor to ensure the most efficient use of funds. ** Please attach addendums.			
Requested By			
	Name	Date	
Approved By Majority of the Executive Committee (If \$1000 or less)	_____	_____	
	Signature	Date	
Approved by Majority of Board of Directors (If more than \$1,000)	_____	_____	
	Signature	Date	
	OR Date of Approval Via Email:		<i>Attach Email Approvals.</i>
Attachments			
Notes/Special Instructions			