RESOLUTION for PAYMENT

Reported	Checked	Approved		Reported	Checked	Approved
/	/	/		/	/	/
L		<u> </u>				
Date:			Department:			
Name:				LISD		
Customer:						
Customer: Account Title:						
Description			Budget code.			
Description						
			VOUCHER			
[Supporting	g Documen	t]				
1.						
2.						
3.						

