



Conference Authorization Request

**Attach supporting literature/documentation to this form.*

Date: 2/15/23

Name of attendee(s): LARRY MAHER

Department/Committee: BUILDINGS

Name of conference: TR4-SOVIETY BUILDING INSPECTORS

Location: CROSTON, NY

Date(s) of conference: 2/15/23

Amount per person: \$80.⁰⁰

Purchase Order Request

Vendor Name: LARRY MAHER
(Address &
phone if new)

Budget Code:

Amount: \$80.⁰⁰

PO number:

Authorization

Approved:

Denied:

Reason for denial: