

DELEGATION of SIGNING AUTHORITY

DATE: _____

FUND: _____ ORG: _____ ACCT: _____

FUND/BUDGET HOLDER

UNBC EMPLOYEE DELEGATE

NAME: _____

NAME: _____

TITLE: _____

TITLE: _____

PHONE No.: _____

PHONE No: _____

EMAIL: _____

EMAIL: _____

Signature

Signature

By signing above I delegate to the above listed employee a maximum dollar limit per transaction on the above fund and org to:

Purchasing/Contracts \$ _____

Mailroom/Shipping \$ _____
Central Stores

Finance \$ _____

Bookstore \$ _____

Chem Stores \$ _____

Copy Services \$ _____

This delegation is valid until _____ or rescinded.
Month day year

ADDITIONAL FUND: _____ ORG: _____ ACCT: _____ Valid from: _____ to: _____

ADDITIONAL FUND: _____ ORG: _____ ACCT: _____ Valid from: _____ to: _____

ADDITIONAL FUND: _____ ORG: _____ ACCT: _____ Valid from: _____ to: _____

SIGNING AUTHORITY CANCELLED ON: _____ BY _____

Send Original to Purchasing
Purchasing will cc: Bookstore, Finance, Distribution Services, Chem Stores, Copy Services