



Delegation of Signing Authority Form

TO WHOM IT MAY CONCERN, I HEREBY DELEGATE SIGNING AUTHORITY FOR EXPENDITURES TO:

(Please print name and title)

(Sample signature)

This authorization is for:

- Full delegated authority including delegated authority for all expenditures
- Restricted delegated authority for all expenditures only
- Restricted delegated authority for expenditures only, up to \$ _____

Delegated authority will apply to the following Banner accounts:

Fund: _____	Org: _____
Fund: _____	Org: _____
Fund: _____	Org: _____

This authorization will remain in effect from _____ until: _____ .
(start date) (end date not to exceed 90 days)

I have read the Policies and Procedures of the University of Ontario Institute of Technology as detailed in the **Signing Authority Policy** and in accordance with those Policies, I do hereby delegate signing authority as noted above.

Signature of Designator

Date

Name and Title (please print)

The original approved form must be sent to Finance - Accounts Payable, Campus Corners, and a scanned copy e-mailed to Purchasing at purchasing@dc-uoit.ca

Print Form