

## Authorization for Approval of Payments Outside of Signature Authorization

Date: \_\_\_\_\_

Name & Title: \_\_\_\_\_ Department: \_\_\_\_\_

**Select one:**

Limited to Vendor: \_\_\_\_\_ Fiscal Year: \_\_\_\_\_

Limited to Blanket PO: \_\_\_\_\_ Supplier: \_\_\_\_\_

Authorization to utilize the more efficient process for approving invoices on Blanket POs or Contract POs which require various other department signature approvals. By approval of the College Requisition and authorized signature(s) below, authorization is given designee to approve supplier invoices as indicated above.

The work performed and related invoices shall continue to be scrutinize as normal business.

Designee Name & Signature: \_\_\_\_\_

Signature	Department	Chartfield String

RETURN TO ACCOUNTING OFFICE, 103 CARLOTTI ADMINISTRATION BLDG.