### CONTRACTOR SIGNATURE AUTHORIZATION FORM

<table>
<thead>
<tr>
<th>Agency Name:</th>
<th>Contract Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Name:</td>
<td>Contract Period:</td>
</tr>
</tbody>
</table>

#### COMPLETE PART 1 AND PART 2 IN BLUE INK. ATTACH BOARD RESOLUTION, IF APPLICABLE, TO VERIFY SIGNATURE AUTHORIZATION.

**PART 1 CERTIFICATION:** PER THE AGENCY’S BYLAWS AND THE ATTACHED BOARD RESOLUTION (IF APPLICABLE), WE HEREBY VERIFY THAT I AM AN AUTHORIZED AGENCY SIGNATORY/WE ARE AUTHORIZED AGENCY SIGNATORIES FOR THE AFOREMENTIONED AGENCY AND AS SUCH CAN SIGN AND/OR DELEGATE AUTHORIZATION TO SIGN AND BIND THE AGENCY AS IT RELATES TO THE ABOVE-REFERENCED PROGRAM TO THE DELEGATED AUTHORIZED SIGNATORY/SIGNATORIES LISTED ON THIS FORM.

<table>
<thead>
<tr>
<th>SIGNATURE AUTHORIZATION IS PROVIDED TO AGENCY</th>
<th>SECTION # OF THE AGENCY’S BYLAWS</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ PER SECTION (INCLUDE SECTION NUMBER)</td>
<td></td>
</tr>
<tr>
<td>□ PER THE BOARD’S RESOLUTION (COPY ATTACHED)</td>
<td></td>
</tr>
</tbody>
</table>

**AUTHORIZED SIGNATORY BELOW:**

<table>
<thead>
<tr>
<th>CONTRACT/AMENDMENTS WILL REQUIRE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ ONE SIGNATURE PER BYLAWS</td>
</tr>
<tr>
<td>OR</td>
</tr>
<tr>
<td>□ TWO SIGNATURES PER BYLAWS or AS A CORPORATION**</td>
</tr>
</tbody>
</table>

#### AGENCY AUTHORIZED SIGNATORY

- Print Name: ____________________________
- Signature: ____________________________
- Date: ________________
- Email/Phone: ____________________________
- Title: ____________________________

#### **AGENCY AUTHORIZED SIGNATORY**

- Print Name: ____________________________
- Signature: ____________________________
- Date: ________________
- Email/Phone: ____________________________
- Title: ____________________________

**If Agency is a corporation, two (2) authorized signatories will be required on all documents submitted, unless specified in the organization’s Bylaws or corporate resolution.**

#### PART 2. DELEGATED AUTHORIZED SIGNATORIES

**AUTHORIZED SIGNATORY**

- Print Name: ____________________________
- Signature: ____________________________
- Document(s) Authorized to sign:
  - INVOICES
  - REPORTS
  - CONTRACT
  - CONTRACT AMENDMENTS
  - BUDGET & BUDGET AMENDMENTS
- Email: ____________________________
- Date: ________________
- Title: ____________________________

**AUTHORIZED SIGNATORY**

- Print Name: ____________________________
- Signature: ____________________________
- Document(s) Authorized to sign:
  - INVOICES
  - REPORTS
  - CONTRACT
  - CONTRACT AMENDMENTS
  - BUDGET & BUDGET AMENDMENTS
- Email: ____________________________
- Date: ________________
- Title: ____________________________

**AUTHORIZED SIGNATORY**

- Print Name: ____________________________
- Signature: ____________________________
- Document(s) Authorized to sign:
  - INVOICES
  - REPORTS
  - CONTRACT
  - CONTRACT AMENDMENTS
  - BUDGET & BUDGET AMENDMENTS
- Email: ____________________________
- Date: ________________
- Title: ____________________________

**AUTHORIZED SIGNATORY**

- Print Name: ____________________________
- Signature: ____________________________
- Document(s) Authorized to sign:
  - INVOICES
  - REPORTS
  - CONTRACT
  - CONTRACT AMENDMENTS
  - BUDGET & BUDGET AMENDMENTS
- Email: ____________________________
- Date: ________________
- Title: ____________________________

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**IMPORTANT NOTE:** If the signature authorization status of any individual changes during the term of the contract, it is the responsibility of the contractor to contact their respective Program Officer/Research Analyst/Public Affairs Officer regarding the change and to complete and submit a new Signature Authorization Form. Incorrect information on file may delay the processing of any of the documents submitted.

**USE NEW PAGE FOR ADDITIONAL AUTHORIZED SIGNATORIES. ALL ADDITIONAL PAGES MUST BE SIGNED BY THE AGENCY’S AUTHORIZED SIGNATORY OR SIGNATORIES**

**DO NOT MODIFY THIS FORM**

FY 2012-2013