



Abraham Baldwin Agricultural College

Signature Authorization for Budgetary Expenditures Form

This form will designate the authorized signatures that are allowed for the designated documents coming from the department or project listed below. Any other signatures will not be allowed and will result in the document to be sent back to the submitting department/unit.

Department Number & Name: _____

Project Number or Account: _____

Approving Documents

- | | |
|--|---|
| <input type="checkbox"/> Direct Purchases (supplies, services, etc.) | <input type="checkbox"/> Travel Vouchers |
| <input type="checkbox"/> Purchase Order Requests | <input type="checkbox"/> P Card Reports |
| <input type="checkbox"/> Petty Cash Requests | <input type="checkbox"/> Transfer/Correction Form |
| <input type="checkbox"/> Position Request Form | <input type="checkbox"/> Cash Advance Form |

Approving Signatures

At least two of the below signatures must be on every document checked above from the department or for the project number designated above. Complete this section to Add (A), Change (C), or Delete (D) signature authorization for individuals listed below:

Action: Add, Change, Delete	Name (Type or Print)	User ID (e-mail name)	Signature	Restrictions	Date

Primary Authorization:

This is to be completed by the Department Owner to authorize this request:

Department Head/Unit Head Name	Department Head/Unit Head Name	Date

Secondary Authorization (if required):

This is to be completed by the Department Owner to authorize this request:

Dean/Vice President Name	Dean/Vice President Signature	Date

Please mail the original paper copy to Business Office and keep a copy for your files.