

# DELEGATION OF SIGNING AUTHORITY

To Whom It May Concern:

By means of this letter, I, \_\_\_\_\_ (Delegating Official), delegate the authority herein described to \_\_\_\_\_ (the Delegate), on the following terms and conditions:

1. The Delegate may sign, on my behalf, for expenses/income related to (Delegating Official will initial by each item that delegate has authority to sign)

\_\_\_\_ PRDs                      \_\_\_\_ Purchasing Requisitions/SRM                      \_\_\_\_ Procard Purchases  
\_\_\_\_ Travel Vouchers                      \_\_\_\_ JVs                      \_\_\_\_ SAG forms  
\_\_\_\_ SPV                      \_\_\_\_ Check/Cash Transmittals

2. In the box below provide a description of departments/units/cost centers/projects that are to be delegated.

3. The effective date of this delegation is \_\_\_\_\_ and shall run until \_\_\_\_\_, or until revoked by the delegating official or his/her direct supervisor.
4. The authority delegated is not subject to sub-delegation without my prior and express written consent.
5. The Delegate is fully aware of the intent, scope, and forecasted activities of the accounts, and as such, will be able to verify that the nature of any expense being approved is required to carry out the program as laid out in the original award or budget document.
6. This signed form must reside in the departmental file for auditing purposes.
7. The Delegating Official is ultimately responsible for the expenses charged to the accounts and the detailed ledgers must be reviewed by the Delegating Official monthly. (Roles and Responsibilities [www.uky.edu/EVPFA/Controller/files/BPM/E-1-3.pdf](http://www.uky.edu/EVPFA/Controller/files/BPM/E-1-3.pdf) )
8. The Delegate who will have signature authority must be a regular employee of the University (*students are not allowed to be delegated this authority*).

**Responsibility Statement:** *I understand and acknowledge that I am still responsible for the expenses that charge to my accounts, and it is my responsibility to routinely review my accounts for accuracy.*

### Signature (Delegating Official)

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

### Acknowledged and agreed:

Signature [Delegate] \_\_\_\_\_

Name and Title \_\_\_\_\_ Date \_\_\_\_\_

<sup>1</sup> Written delegation of signature authority is required in order to comply with AR 8:3 <http://www.uky.edu/regs/files/ar/ar8-3.pdf>