Employees Only **Form SF4446**
Revised

Employee Signature Authorization Card

Controllers Payroll/Personnel Service Division

SECTION I. DUTIES AUTHORIZED

Make sure that the same person is not assigned to both TESS Approval/Time Roster Signing and Warrant Release.

Dept No. _____ **Dept.Name**_____

Authorization for the following duties:

☐ PAR signing ☐ Warrant Release signing/check pick-up
☐ PDF signing ☐ TESS Approval/Time Roster signing

SECTION II. AUTHORIZATION SIGNATURE

I do hereby authorize the person whose signature appears below, to sign, approve, or pickup in my name, documents mentioned above for this department.

_____ _____
Signature of Head of Department Date

_____ _____
Signature of Person Hereby Authorized Print Name in Full

_____
Work Telephone Number

SECTION III. CANCEL A SIGNATURE AUTHORITY

Cancellation Signature Authority For:

_____ _____
Name Title

_____ _____
Signature of Appointing Officer Date

PPSD USE ONLY

_____ Data Entry Date _____ Initials _____ Date

COMMENTS:_____

_____

_____

_____

K:\MEMOS\2006 Memos\Employee Sign Auth Card.doc
May 11, 2006