



# Signature Authority

## Delegation of Signature Authority\*

Submit completed form to OCFO, Controller's Office, MS: 971-GA

\*Request for acquisition or payment of goods and/or services up to limit indicated below.

For assistance please contact sashelp@lbl.gov

- Action to be taken
  - Delegate new Signature Authority
  - Change existing approval limit
  - Transfer to another Division/Department
  - Remove Authority

Name of employee

Title

Employee ID

Division/Department

**For new Signatories Only:**  
Employee Signature

<b>Approval Limit</b>	\$1K	\$10K	\$50K	\$250K	\$1M
	\$5K	\$25K	\$100K	\$500K	\$2.5M

### Justification for Signature Authority > \$500K

**Note: Required Training for Signature Authority can be found [HERE](#)**

### APPROVALS

#### Authorizing Signature (from list below)

	Printed Name	Employee ID
	Division	Date
<b>Check One:</b>	Laboratory Director	Chief Financial Officer
	Deputy Director	Division Director
	Associate Laboratory Director	Department Head
		Business Manager
		Project Director
		Other (with prior approval from one of the above)

### OCFO Use Only

#### OCFO approval (if over \$500K)

Signature

Date

Print name

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

Entered By: \_\_\_\_\_