

AUTHORIZATION OF SIGNATURES

Resolution Number _____

_____ **SCHOOL DISTRICT** **DATE:** _____

I, _____, Clerk of the governing Board of the above named School District of Orange County, California, hereby certify that the said Board at a regular/special meeting thereof, held on the _____ day of _____, 2_____ adopted by a majority vote of said Board, a board action/resolution that the following named persons be authorized to sign and/or **electronically** approve payments and documents related to Payroll, Accounts Payable Batches, Purchase Orders, Contracts, and Travel Reimbursement Requisitions, as indicated, and that all previous authorization of signatures are rescinded.

TYPED NAME	SIGNATURE	AUTHORIZED TO APPROVE				
		PAYROLL DOCUMENTS ¹	ACCOUNTS PAYABLE BATCHES ²	PURCHASE ORDERS	CONTRACTS	TRAVEL REIMBURSEMENTS

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____, 2_____.

Clerk: _____

¹ Documents related to payroll such as, but not limited to: Affidavits, Cancel Checks, Notice of Employment/Change Status, Payroll Authorization, Time Sheets, and Vendor Requests

² Districts using the Bitech Classic or Business Plus systems only.