



Champions For Our Children

**CONTRACTOR SIGNATURE AUTHORIZATION FORM**

Form \_\_\_\_ of \_\_\_\_

<b>Agency Name:</b>		<b>Contract Number:</b>	
<b>Project Name:</b>		<b>Contract Period:</b>	

INSTRUCTIONS: Check the appropriate boxes below and then sign and submit two (2) completed original forms. The form will be considered incomplete if the Certification section is not signed by the agency's authorized signatory, as delegated by bylaws or corporate resolution. If applicable, a copy of the board resolution must be included with completed form.

ALL SIGNATURES MUST BE DONE IN **BLUE** FOR VERIFICATION PURPOSES.

AUTHORIZED SIGNATORY  
 Print Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
DOCUMENT(S) Authorized to sign: ☐ INVOICES ☐ REPORTS ☐ CONTRACT ☐ CONTRACT AMENDMENTS ☐ BUDGET & BUDGETAMENDMENTS

AUTHORIZED SIGNATORY  
 Print Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
DOCUMENT(S) Authorized to sign: ☐ INVOICES ☐ REPORTS ☐ CONTRACT ☐ CONTRACT AMENDMENTS ☐ BUDGET & BUDGETAMENDMENTS

AUTHORIZED SIGNATORY  
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AUTHORIZED SIGNATORY  
 Print Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
DOCUMENT(S) Authorized to sign: ☐ INVOICES ☐ REPORTS ☐ CONTRACT ☐ CONTRACT AMENDMENTS ☐ BUDGET & BUDGETAMENDMENTS

**CERTIFICATION:** PER THE AGENCY'S BYLAWS AND THE ATTACHED BOARD RESOLUTION (IF APPLICABLE), I/WE HEREBY VERIFY THAT I AM AN AUTHORIZED AGENCY SIGNATORY/WE ARE AUTHORIZED AGENCY SIGNATORIES FOR THE AFOREMENTIONED AGENCY AND AS SUCH CAN SIGN AND/OR DELEGATE AUTHORIZATION TO SIGN AND BIND THE AGENCY AS IT RELATES TO THE ABOVE-REFERENCED PROGRAM TO THE DELEGATED AUTHORIZED SIGNATORY/SIGNATORIES LISTED ON THIS FORM.

<b>SIGNATURE AUTHORIZATION IS PROVIDED TO AGENCY AUTHORIZED SIGNATORY BELOW:</b>	<input type="checkbox"/> PER SECTION (INCLUDE SECTION NUMBER) _____ OF THE AGENCY'S BYLAWS <input type="checkbox"/> PER THE BOARD'S RESOLUTION (COPY ATTACHED)
<b>GRANT AGREEMENT/AMENDMENTS WILL REQUIRE:</b>	<input type="checkbox"/> ONE SIGNATURE PER BYLAWS <b>OR</b> <input type="checkbox"/> TWO SIGNATURES PER BYLAWS or AS A CORPORATION*

**AGENCY AUTHORIZED SIGNATORY:**  
 Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*AGENCY AUTHORIZED SIGNATORY:**  
 Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*If Grantee is a corporation, two (2) authorized signatories will be required on all documents submitted, unless specified in the organization's Bylaws or corporate resolution.

**IMPORTANT NOTE:** If the signature authorization status of any individual changes during the term of the grant agreement, it is the responsibility of the grantee to contact their respective Program Officer regarding the change and to complete and submit a new Signature Authorization Form. Incorrect information on file may delay the processing of any of the documents submitted.

USE NEW PAGE FOR ADDITIONAL AUTHORIZED SIGNATORIES. ALL ADDITIONAL PAGES MUST BE SIGNED BY THE AGENCY'S AUTHORIZED SIGNATORY OR SIGNATORIES.