Signature Authorization

Please submit TYPED form to HSC Contract and Grant Accounting Accounting Office MSC09 5225

Index:		Fund:					
Index Description:		Org. Code & Name:					
			:				
Date:		Activity:					
Date:Responsible Person/ or PI: Index Administrator:		UNM ID:	_				
		UNM ID:					
The following individuals are authorize	zed to sign on the abo	ve index for the docume	nts specifie	d:			
Names(s) of Individuals Authorized to Approve Documents	Signature	Title	UNM Net ID	All HR Documents*	Internal POs/PRs	Chrome River Pcard, Travel Expense, Invoice **	Petty Cash
							+
							+
* Separate UNM Signature form is	required for time s	heets.					
RESTRICTED INDICES ONLY	A	AWARD NO:					
This contract or grant is governed by policies accountant assigned to this index is and reporting. Over expenditures to this index necessary.	It i	s recommended that a meeti	ng be schedul	led to answer	questions	regarding proper a	eccounting
Expenditure documents will not be process. More information on University Policies mat 101, 277-4664; and from The University Adassigned to your account, at appropriate Account.	ay be obtained from the U Iministrative Policies and	UNM Faculty Handbook ava	ailable at the (Office of the U	University		
As P.I. for this accounting string, I am aware Chair or Dean may also sign.	e of and agree with the d	lepartment's electronic appr	oval queue. I	n my long ter	m absence	or illness the Dep	artment
**Please insure signature authorization is in	alignment with the Chr	ome River Approval Group	Form.				
I understand that although the above are Person, I am ultimately responsible for m	0	this index in my absence, a	s Dean, Dire	ctor, Princip	al Investi _i	gator or other Re	sponsible
Signature		Date		_			