Signature Authorization

Please submit TYPED form to Contract and Grant Accounting MSC 01-1245 CGA 2100

Index:		Fund:						
Index Title: Project Number:		Org Code & Name: Program:						
Date:		Activity:						
Responsible Person/ or PI Index Administrator:		UNM ID: UNM ID		Telephone:				
				Telephone:				
The following individuals are autl	horized to sign on the above	e index for the documen	ts specified:	 :		-		
Names(s) of Individuals Authorized to Approve Documents	Signature	Title	UNM Net ID	All HR Documents*	PR Internal Only	Non Travel DPR	Travel DPR	Petty Cash
*Separate UNM Signature form is	s required for time sheets							
RESTRICTED INDICES ONLY	o required for time sheets.	GR	ANT CODE	•				
This contract or grant is governed by po	•	•		•				
The accountant assigned to this accoun reporting. Over expenditures to this in								
necessary. Expenditure documents will not b	e processed until this FUL.	LV completed and signe	ed authoriza	tion is rec	eived			
More information on University Pol						ok): and	d	
http://policy.unm.edu/university-pol								uidelines are
available from the team assigned to						·		
As P.I. for this accounting string, I a	am aware of and agree with the	he department's electroni	ic approval q	ueue. In m	y long t	erm ab	sence or	r illness the
Department Chair or Dean may also	sign.							
I understand that although the ab	ove are authorized to sign i	for this index in my abs	ence, as Dea	ın, Directo	r, Princ	ipal In	vestiga	tor or other
Responsible Person, I am ultimate	-1 4 4	4.0						
- · · · · · · · · · · · · · · · · · · ·	ely responsible for my trans	sactions.						
- ,	ery responsible for my trans	sactions.						