



## SIGNATURE VERIFICATION AND ACCOUNT INFORMATION ACCESS

Use this form to give sample signatures for those authorized to sign requests for expenditures. Signers must be employees of the University of Oregon or the University of Oregon Foundation; Development Officers *cannot* be signers. Only authorized signers and reporting contacts will receive fund intent and financial activity reports.

The Dean's designation of authorized signers and reporting contacts is consistent with the Agreement to Abide by Policy IT-09-2009 Acceptable Use of Technology Resources and each designee is expected to continue to hold this information as confidential and is not authorized to forward this information to any unauthorized person nor store or use this information for any other use than the specific business need under which it was shared.

Prepared by (name): \_\_\_\_\_

Phone #: \_\_\_\_\_

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

**DEPARTMENT APPROVAL for fund changes as requested below:**

*I am aware that this constitutes delegation of authority to sign on my behalf but does not alleviate me of full responsibility.*

\_\_\_\_\_  
Signature of Dean (or Dean equivalent)

\_\_\_\_\_  
Name, title, and date (printed)

This change applies to all funds in division number: \_\_\_\_\_ - OR - department number: \_\_\_\_\_

**TO ADD NEW SIGNER(S):**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (printed)

**TO REMOVE CURRENT SIGNER(S):**

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Name (printed)

**TO ADD OR REMOVE REPORTING CONTACTS:**

Submit an email to [askaccounting@uofoundation.org](mailto:askaccounting@uofoundation.org) including written approval from any authorized signer.

**UO Foundation Processing**

\_\_\_\_\_  
Date received

\_\_\_\_\_  
Entered by