

Business Unit Voucher Authorizer Designation

BUSINESS UNIT CODE: _____ DEPT. ID: _____

BUSINESS UNIT/AGENCY NAME: _____ DATE: _____

DIVISION/BUREAU/DEPT. NAME: _____

The purpose of this form is to certify the State Agency Voucher Authorizers at this Business Unit (B/U) and Department. This document should be kept on file at the Business Unit and may be requested by the Office of the State Comptroller (OSC) for audit. These Voucher Authorizers must also be designated electronically in the Contacts Database maintained by OSC. Please see Chapter XII.4.C of the *Guide to Financial Operations* for additional information.

I hereby certify that the following are authorized to transmit vouchers for payment to OSC:

Signature with Printed Name	Phone No. & Email	Title	Restrictions
1. _____ _____	_____	_____	_____
2. _____ _____	_____	_____	_____
3. _____ _____	_____	_____	_____
4. _____ _____	_____	_____	_____

Signature of B/U Head or Designee	Phone No. & Email	Title
_____	_____	_____

Contacts Database Updated
Initial

If this is the first time the B/U head is creating a Designee for the B/U, the B/U head should complete and sign the following:

I hereby designate _____ to approve and designate other agency personnel for the role of Voucher Authorizer, as required by SFL §110. I understand that those designees will have the authority to transmit vouchers for payment to OSC.

SIGNATURE, TITLE AND DATE: _____