PINAL COUNTY
FINANCE DEPARTMENT

SIGNATURE AUTHORIZATION FORM

Cost Center(s):	Department Name:

The employee(s) whose name, title, and signature appear below are authorized to sign the documents as indicated on this form.

EMPLOYEE'S NAME & TITLE (Type or print full name & title)	EMPLOYEE'S SIGNATURE	AUTHORIZED TO SIGN: (See key below)

AUTHORIZED BY: Must be signed by Elected Official, County Manager, Assistant County Manager or Department Director.

NAME	SIGNATURE	DATE SIGNED

Authorization to Sign Key

A. Payment Request Forms
B. Travel Request Forms
C. Travel Advance Request Form
D. Employee Travel Claims
E. Purchase Requisitions (Approval)
F. Employee Timesheets (Greenbars)
G. Pick Up Accounts Payable Checks
H. Pick Up Payroll Checks