

## OBJECTIVES AND RESPONSIBILITIES: Delegation of Signing Authority Form

TO WHOM IT MAY CONCERN, I HEREBY DELEGATE SIGNING AUTHORITY FOR EXPENDITURES TO:

(Please print name and title)	
(Sample signature)	
This authorization is for:	
All expenditures*	
*except those precluded by policy at <a href="http://finance.utoronto.ca/policies/and-responsibilities/delegation-of-authority/">http://finance.utoronto.ca/policies/and-responsibilities/delegation-of-authority/</a>	gtfm/financial-management/objective-
This authorization will apply to the following FIS accounts	;
CFC Fund	For specific cfc or fund accounts, see attached listing
And all subordinate cfc's Include all funds	See deadled listing
This authorization will remain in effect from	until: (Start date)
Revoked or Specify end date:	(Start date)
I have read the Policies and Procedures of the University of Toronto as detailed in the <i>GUIDE TO FINANCIAL MANAGEMENT &gt;&gt; FINANCIAL MANAGEMENT &gt;&gt; OBJECTIVES AND RESPONSIBILITIES &gt;&gt; <u>Delegation of Authority</u>. and in accordance with those Policies, I do hereby delegate signing authority as noted above.</i>	
SIGNATURE OF DESIGNATOR DA	ITE
NAME & TITLE (please print)	

Form should be kept on file and be readily available as required by Internal Audit and/or Financial Services