

Signature Card

Note: This form replaces all previous AG-205 Signature Authority forms. Complete all parts of this form.

- AgriLife Research AgriLife Extension Service Texas Veterinary Medical Diagnostic Laboratory
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- Add/Update User Expire User
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Section I: Identification

Name: _____ UIN: _____
Title: _____
Unit: _____
Signature: _____ Date: _____

Section II: Authorized Documents

- Purchase Voucher and Corrections Concur Travel Expense Reports
 Foreign Travel Requests Deductions from Income (Refunds)
 Payment Card Statements FAMIS access requests
 Payroll –Supplemental Payroll Documents, Payroll Corrections, AG-513 (Payroll Application Access)
 Inventory* – Gifts & Reclassifications, Inventory Deletion Request, Property Transfer Form, TDP, Request Form, Request to Demolish Property, Request to Sell Inventory, Sales Form
**Generally, this authorization is for the accountable property officer or alternate accountable property officer.*

Section III: Authorization Approval

I authorize the individual named above to process the documents for the unit, as indicated.

Unit Head: _____ UIN: _____
(printed name)

Signature: _____ Date: _____

Fiscal Office Approval: _____ Date: _____
(If applicable to approve unit head)