

AUTHORIZED SIGNATURE FORM for the WATER SECTOR PROGRAM

Authorized Signatures for Requests for Payment

Name/Address of Grantee Organization	Subrecipient Identification Number
(1)	(2)
SIGNATURES OF INDIVIDUALS AUTHORIZED TO DRAW ON THE CITED CONTRACT FUNDS ANY TWO SIGNATURES REQUIRED TO SIGN OR COUNTERSIGN	
Typed Name and Signature	Typed Name and Signature
(3)	(4)
Typed Name and Signature	Typed Name and Signature
(5)	(6)
I CERTIFY THAT THE SIGNATURES ABOVE ARE OF THE INDIVIDUALS AUTHORIZED TO DRAW PAYMENT VOUCHERS FOR THE CITED CONTRACT FUNDS	OCD-LGA USE ONLY APPROVED
(7)	(8)
Date and Signature of Certifying Officer	Date and Signature of Certifying Officer

— IMPORTANT — NO ERASURES OR CORRECTIONS MAY APPEAR ON THIS FORM

INSTRUCTIONS FOR AUTHORIZED SIGNATURE FORM

- 1 Insert name and address including zip code of the Grantee Organization receiving funds.
- 2 Leave blank, OCD-LGA staff will insert Subrecipient Identification Number here.
- 3-6 These blocks are for the typed name and signature of individuals who are authorized to sign the Grantee Organization’s Request for Payments. Two signatures are required on each request, it is recommended that three or four people are authorized to sign. Note that the individual who certifies the signatures on line 7 may not be one of the authorized persons on lines 3 through 6.
- 7 Signature and Date of Individual certifying the signatures in lines 3 through 6. This is typically the Chief Executive Officer (Mayor, Police Jury President, Board President, etc.). If, however, the Chief Executive Officer wishes to sign the Requests for Payment, he/she would sign once in lines 3 through 6 and someone else can certify the signatures in line 7. If someone other than the Chief Executive Officer certifies the signatures in line 7, this form must be accompanied by a resolution of the Grantee Organization’s governing body authorizing him/her to certify the signatures.
- 8 Leave blank, OCD-LGA will approve document here.