



### Signature Sub-Delegation Form

From: \_\_\_\_\_  
\_\_\_\_\_  
(name and title of signature sub-delegation, delegator)

To: \_\_\_\_\_  
\_\_\_\_\_  
(name and title of signature sub-delegation, delegatee)

Subject: Delegation of Authority: Per Standard Practice Guide 601.24

As delegated to the \_\_\_ [Insert delegator title] \_\_\_\_\_, the signature authority for the following responsibilities is further delegated to the positions below:

For Flint Campus, \_ [Insert Document/Contract/Designation Types] \_\_\_\_\_

Title of Delegate: \_\_\_\_\_

Name of Delegate currently in position: \_\_\_\_\_

Effective Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
(Expiration date cannot exceed end of the fiscal year in which the sub-delegation is made)

I have reviewed SPG 601.24 Table 1 – Flint Campus and authorize my signature authority to be sub-delegated to:

\_\_\_ [Insert name of delegatee] \_\_\_\_\_

Signature Delegated from: \_\_\_\_\_

Printed Name: \_\_\_\_\_

I have reviewed and understand the responsibilities as outlined SPG 601.24. I accept the signature authority delegated to me and the responsibilities that come with it. I further understand that I cannot sub-delegate this authority to anyone.

Signature Delegated to: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Return completed form to:  
Procurement & Contracts Department  
Julie Insalaco  
Northbank Center, Suite 504