



PAYMENT SERVICES

Signature Authorization Form

for banner

DELIVER TO:
GIFT ACCOUNTING
317 S. COLLEGE ST.
AUBURN, AL 36849
EMAIL: AUFPAYMENTSERVICES
@AUBURN.EDU
PHONE: 334.844.1128

*Please provide name, signature, and title of those authorized to approve financial documents.
Also include the applicable AUF fund/organization numbers and names.
Please send completed form via campus mail to Development Accounting, Attn: Kelly Campbell.
If you have any questions, please call 4-3001.*

College/Program Name

AUF FUND/ORGANIZATION NUMBER(S) AND NAME(S):

_____	_____	_____
fund number	organization number	fund/organization name
_____	_____	_____
fund number	organization number	fund/organization name
_____	_____	_____
fund number	organization number	fund/organization name
_____	_____	_____
fund number	organization number	fund/organization name
_____	_____	_____
fund number	organization number	fund/organization name

Signatory authority is granted to the following individual(s):

_____	_____	_____
Printed Name	Signature	Title
_____	_____	_____
Printed Name	Signature	Title
_____	_____	_____
Printed Name	Signature	Title
_____	_____	_____
Printed Name	Signature	Title

AUTHORIZATION BY DEAN OR DEAN-LEVEL OFFICIAL:

I authorize the individual(s) listed to approve Auburn University Foundation vouchers, invoices, journal entries, and reimbursements for the referenced fund(s).
I understand that approval by the Dean is required for transactions of \$10,000 and above.

Printed Name

Signature