

Documentation of Signing Authority

Date: _____

Recipient Name: _____

Grant Project: _____ Grant #: _____

The following parties have authority to sign on my behalf until rescinded in writing:

Name		Signature	
Modifications	Extensions	Reimbursements	Other (specify) _____

Name		Signature	
Modifications	Extensions	Reimbursements	Other (specify) _____

Name		Signature	
Modifications	Extensions	Reimbursements	Other (specify) _____

Name		Signature	
Modifications	Extensions	Reimbursements	Other (specify) _____

Name		Signature	
Modifications	Extensions	Reimbursements	Other (specify) _____

Name		Signature	
Modifications	Extensions	Reimbursements	Other (specify) _____

Name		Signature	
<input type="checkbox"/> Modifications	Extensions	Reimbursements	Other (specify) _____

I understand that, as the primary contact, I maintain responsibility for this project and any documents submitted by the above named parties.

Name Signature

**This format is intended as a signing authority guide only. Please contact your local Forest Service coordinator if you have questions regarding the use of this form.*