

Authorized Person: _____	Signature in Full: _____	Initials: _____
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Department: _____	Supervisor's Printed Name: _____	Supervisor's Signature: _____	Date: _____
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Max Auth.Amount: _____	Acceptable Types of Authorizations: <input type="radio"/> Purchase Requisitions <input type="radio"/> Expense Reports <input type="radio"/> Invoices <input type="radio"/> Graphic Requisitions <input type="radio"/> Check Requisitions <input type="radio"/> Other _____
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Authorized to Use the Following Cost Centers:

Authorized Signature Form

Moody Bible Institute

Approved by Controller:

Approval Date: