

TEXAS A&M RESEARCH FOUNDATION

DELEGATION OF AUTHORITY

Account Number: _____ Action: Add Update Remove

Name of Delegated Person: _____

UIN: _____ Email: _____

Signature of Delegated Person: _____

Levels of Authority:

*If authorization is given for All Fiscal Matters or Payroll, the delegated person must have supervisory authority for the work performed, and should not be responsible for preparing TAMUS departmental invoices for this account.

- All Fiscal Matters* **OR** Payroll* (Must also be delegated in TAMRF TAMRF Electronic Payroll Certification System.)
- Travel
- Purchases Under \$5,000
- All Purchases

If it becomes necessary to update this delegation at any time during the term of this account, please submit another delegation form. Return the completed form to:

**Texas A&M Research Foundation
400 Harvey Mitchell Parkway South, Suite 100
College Station, Texas 77845**

TAMU Campus MS 3578

CERTIFICATION:

The person listed above is authorized to act on my behalf for fiscal matters for the duration of this account or until otherwise notified in writing.

Principal Investigator (Signature)

Date

TAMRF USE ONLY:

Project Administrator (Signature)

Date

- FAMIS 52B Updated
- Send email to Payroll