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| J:\Function\Branding\- New OMES logo\Horizontal\OMES-logo-horiz-RGB.jpg | Authorized Signature |

The form shall identify the name, title, and signature of those individuals designated by the appointing authority to sign and approve requisitions, purchase orders, sole source certifications, change order requests, and surplus property transactions for each state agency and effective date of change. Identify the removal of a designation of signature authority by the appointing authority by listing the name and title of the individual and effective date of the change. The form shall be submitted to the State Purchasing Director within 30 days of any additions or deletions in the signature authority. Reference OAC 260:115-5-13.

**Submission of this form shall be sent to:** [**CP.Feedback@omes.ok.gov**](mailto:CP.Feedback@omes.ok.gov)

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|  | **Addition** |  |  |  | **Deletion** |  |

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| Agency Name: | |  |  | Agency # |  |  | Date: |  |
| Primary Contact: |  | |  | Phone: |  | | | | |  |  |

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|  | **REQUISITIONS:** |  |  | **PURCHASE ORDERS:** |
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|  | Printed Name and Title |  |  | Printed Name and Title |
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|  | **CHANGE ORDER REQUESTS:** |  |  | **SURPLUS PROPERTY TRANSACTIONS:** |
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|  | **SOLE SOURCE / SOLE BRAND CERTIFICATIONS:** |  |  |  |
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|  | Signature |  |  | Printed Name, Chief Administrative Officer of the Agency |
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|  | Signature |  |  | Printed Name, Chief Administrative Officer of the Agency |
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|  | Chief Administrative Officer of the Agency |  |  | Chief Administrative Officer of the Requisitioning Unit |