

**COUNTY OF HENRICO
VIRGINIA**

AUTHORIZED SIGNATURE FORM

DEPARTMENT/OFFICE: _____

DATE: _____

To the Director of Finance:

The persons indicated below are authorized to sign or approve/process the following documents: **Direct Pay Invoices, Inter-Departmental Transfers, Purchase Requisitions, Purchase Orders, Receiving Reports and Vendor Invoices.**

NAME

SIGNATURE

Approved By

Department Head or Key Official

Approved By:

County Manager or Designee

NOTE: If none are to be designated, please write NONE in the space above and Return to Finance/Accounting.