

OTHER ITEMS FOR CONSIDERATION:

- 1.) Approve attached Signature Authorization form.

Support: Tab 1 Page A

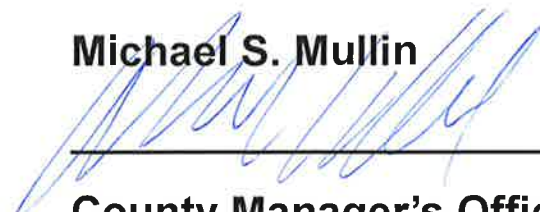
Tab 1
Page A

**PERSONNEL AUTHORIZED TO APPROVE INVOICES,
REQUISITIONS AND BUDGET TRANSFERS**

EMPLOYEE'S NAME:

Michael S. Mullin

SIGNATURE & INITIALS:



DEPARTMENT:

County Manager's Office

FUND NAME	ACCOUNT NO. (ORG)	APPROVAL LIMIT	CHANGES & UPDATES
All Funds	All Orgs	Unlimited	New

SPECIAL CLERK INSTRUCTIONS:

APPLICABLE DURING INTERIM STAGE

NOTE: Keep a copy of this form for your records. If any information should change, please send the new information to the Finance Department to be submitted to the BOCC for approval.

DEPARTMENT HEAD SIGNATURE

DATE

EX-OFFICIO CLERK SIGNATURE

DATE

BOARD APPROVED: