OLD DOMINION UNIVERSITY RESEARCH FOUNDATION SIGNATURE AUTHORIZATION / DELEGATION / PORTAL ACCESS FORM

| PART A - SIG | NATURE AUTHORIZ | ZATION | | - | | | | | | | | | | |
|--|---|---|---------------------|--|-----------------------------------|------------------------------------|---------------------------------------|-----------------------|----------------------|-----------------------------|-----------------------------------|--|--|--|
| NVESTIGATOR NAM | ΛE: | | | _ | | | | | | | | | | |
| INVESTIGATOR MIDAS ID: UIN: | | | - | | | | | | | | | | | |
| EPARTMENT: | | | | . | | | | | | | | | | |
| E-MAIL ADDRESS: | | | | SIGNATURE SPECIMEN | | | | | | | | | | |
| PART B - SIG | NATURE DELEGAT | ION | PART C - | AUTHORIZAT | IONS / AC | CESS GRA | NTED | | | | | | | |
| hereby delegate sign | nature authorityfor the personn | el listed below on my accounts with the follo | wing authorization | ns and on-line acess | as indicated b | elow: (Check all t | that apply) Note | e: Authorizati | ons for sub | awardee paym | ents canno | t be delega | | |
| LIMITED AUTHORIZATION DOLLAR COI CMP Budget Delegate Required | | | | | AUTHOR | IZATIONS (| TIONS GRANTED | | | | PORTAL ACCESS GRANTED | | | |
| _IMIT (if any) | PROJECT NUMBERS: | Check box if project has a CMP requiring a budget delegate | Budget Revisions | Consultant & Honorarium Payments | Purchase Requistions (eREQ) | Procurement Card Settlements | Travel & Reimbursement Payments | Vendor Payments | | Project Report Access | Payroll Autorization (ePAS) | Employee Timesheets | | |
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| DELEGATE | S PRINTED NAME | E-MAIL ADDRESS | MIDAS | S ID (not UIN | CMPR | udget Deleç | | | | IMEN and CER | | | | |
| DELEGATE | OT KINTED IVAILE | E MAIE ADDITEOU | WIDA | J ID (IIOC OIIV | , OIIII B | uaget Beleg | no con | iffict of intere | st with proj | ect (see ODU I | Policy #520 | 1). | | |
| | | | | | | | | | | | | | | |
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| | scussed this arrangement with above accounts still remains wi | the designees indicated above, that they are the designees indicated above, that they are the designees in the designees indicated above. | e aware of the res | ponsibility delegated | I to them, and t | hat their signatur | e is an acceptanc | e of that designation | n of authority. I ur | nderstand that the fidu | ciary | | | |
| | | SIGNATURE OF PRIN | CIPAL INVESTIG | ATOR or CO-INVES | TIGATOR | | | | | | | | | |
| Paturn form | with all required sig | gnatures to: rfpurchas | sina@c | ndu edu | | | | PI | or CO-PI SIGNA | TURE | | | | |