



Update Donee Authorized Signers

Use this form to add/delete authorized signers to/from your account

If more names must be added, make a copy of this sheet and add numbers to signers

Email completed form to carla.jeannette@das.oregon.gov, or fax 503-378-3398

Name of Donee Institution:		Date:	
Department (if College, University, or applicable):		Address (Street and Number):	
Mailing Address/ P.O. Box:		City: ZIP Code:	
County:	Telephone Number (Include extension):		Website Address:
Send Invoices to:		I Authorize Purchases By Anyone In My Agency That Holds: Business Credit Card Purchase Order Either or SPOTS Card	
Job Title and Phone Number:			
Name #1 Add Keep Delete		Email Address	
Title		Phone Number	
Name #2 Add Keep Delete		Email Address	
Title		Phone Number	
Name #3 Add Keep Delete		Email Address	
Title		Phone Number	
Name #4 Add Keep Delete		Email Address	
Title		Phone Number	
Name #5 Add Keep Delete		Email Address	
Title		Phone Number	
Authorized By (Please Print)		Title:	
Chief Administrative Office or Executive Head			
Signature(s)			
Signature of Chief Administrative Office or Executive Head			

☐ Appointed
 ☐ Hired
 ☐ Elected (Term expires __/__/__)
 ☐ Hired by Contract (expires __/__/__)