



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 503-378-8558

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:	
Job Title and Phone Number:	Business Credit Card Purchase Order Either or SPOTS Card	
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 ___/___/___)