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## CERTIFICATION OF SIGNATURES AND DELEGATION OF AUTHORITY (must attach Resolution)

As clerk/secretary to the governing board of the above-named district, I certify that the signatures shown below in **Column 1** are the verified signatures of the members of the governing board. I certify that the signatures shown in **Column 2** are the verified signatures of the person or persons authorized [with Board Delegation of Authority as specified on the attached resolution.] These certifications are made in accordance with the provisions of Education Code Sections: **K-12 Districts:** 35143, 42632, and 42633, 17604

If persons authorized to sign orders as shown in Column 2 are unable to do so, the law requires the signatures of the majority of the governing board. These approved signatures are valid for the period of: In accordance with governing board approval dated \_

Signature \_

Clerk or Secretary of the Board Typed Name

NOTE DI TYPE	Clerk or Secretary of the Board				
NOTE: Please TYPE name under signature.					
Column 1 Signatures of Members of the Governing Board	Column 2 Board Delegation of Authority – required below for individuals signing				
If the Board has given special instructions for signing warrants or orders, please attach a copy of the resolution to this form.	physical documents. i.e. contracts, quotes, Pay 01 and manual warrant requests.				
SIGNATURE	See attached resolution for details. SIGNATURE				
TYPED NAME	TYPED NAME, TITLE				
President of the Board of Trustees/Education *	TITLE				
SIGNATURE	SIGNATURE				
TYPED NAME	TYPED NAME				
Vice President of the Board of Trustees/Education	TITLE				
SIGNATURE	SIGNATURE				
TYPED NAME	TYPED NAME				
Clerk of the Board of Trustees/Education *	TITLE				
SIGNATURE	SIGNATURE				
TYPED NAME	TYPED NAME				
Member of the Board of Trustees/Education	TITLE				
SIGNATURE	SIGNATURE				
TYPED NAME	TYPED NAME				
Member of the Board of Trustees/Education	TITLE				
SIGNATURE	SIGNATURE				
TYPED NAME	TYPED NAME				
Member of the Board of Trustees/Education	TITLE				
SIGNATURE	SIGNATURE				
TYPED NAME	TYPED NAME				
Member of the Board of Trustees/Education	*SECRETARY (per EC1010, the Superintendent)				

<sup>\*</sup>These individuals are authorized to sign reports, budgets, and all documents requiring signature of Secretary, Clerk or President. \*