



District

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: _____ to _____
In accordance with governing board approval dated _____ 20 _____.

Signature _____
Clerk or Secretary of the Board

Typed Name _____
Clerk or Secretary of the Board

NOTE: Please TYPE name under signature.

<p>Column 1 Signatures of Members of the Governing Board</p> <p>If the Board has given special instructions for signing warrants or orders, please attach a copy of the resolution to this form.</p>
SIGNATURE
TYPED NAME
President of the Board of Trustees/Education *
SIGNATURE
TYPED NAME
Vice President of the Board of Trustees/Education
SIGNATURE
TYPED NAME
Clerk of the Board of Trustees/Education *
SIGNATURE
TYPED NAME
Member of the Board of Trustees/Education
SIGNATURE
TYPED NAME
Member of the Board of Trustees/Education
SIGNATURE
TYPED NAME
Member of the Board of Trustees/Education
SIGNATURE
TYPED NAME
Member of the Board of Trustees/Education

<p>Column 2 Board Delegation of Authority – required below for individuals signing physical documents. i.e. contracts, quotes, Pay 01 and manual warrant requests.</p> <p><i>See attached resolution for details.</i></p>
SIGNATURE
TYPED NAME, TITLE
TITLE
SIGNATURE
TYPED NAME
TITLE
SIGNATURE
TYPED NAME
TITLE
SIGNATURE
TYPED NAME
TITLE
SIGNATURE
TYPED NAME
TITLE
SIGNATURE
TYPED NAME
TITLE
SIGNATURE
TYPED NAME
*SECRETARY (per EC1010, the Superintendent)

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