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## SIGNATORY AUTHORIZATION

I HEREBY CERTIFY THAT		
		Name & Title
IS AUTHORIZED TO SUBMIT SIGNATURE, BIND	PROPOSALS	S FOR, AND BY VIRTUE OF THEIR
		Organization Name
TO CONTRACTUAL AGREEMENTS FOR THE PERIOD		
		Contract Term
Signature of Governing Body Official:		
Typed Name:		
Title:		
Date Signed:		
Signature of Official Authorized to Bind Agency:		
Typed Name:		
Title:		
Date Signed:		

Note: Should circumstances require a change in the above, a new Signatory Authorization shall be completed and forwarded to the WIB. Failure to provide the information above may result in the disqualification of your proposal.