Authorized Signature Card for Cash Payments on Oregon Business Development Department Awards		
Recipient		Project Number
City of Sweet Home		C2021657
Signatures of Delegated Authorized Individuals to Request Payments (Two signatures are required to request disbursement of funds)		
Greg Springman - Public Works Director	Kelsey Young - City Manager	
Typed Name and Title	Typed Name and Title	
(1) a	(1) b	
Additional Signatures (if desired)		
Matt Brown - Interim Finance Director		
Typed Name and Title	Typed Name and Title	
(1) cSignature (Highest Elected Official must <u>not</u> sign here)	(1) dSignature (High	est Elected Official must <u>not</u> sign here)
I certify that the signatures above are of the individuals authorized to draw funds for the cited project.  Greg Mahler - Mayor - 9/27/2022	Agency Use Only: Da	te Received:
Typed Name, Title and Date		
(2)Signature of Highest Elected Official or duly authorized official for the Recipient (Must <b>not</b> be listed in item (1) a through (1) d above)		

Oregon Business Development Department/Authorized Signature Card

**Preparation of the Authorized Signature Card Form:** If a mistake is made, or a change is necessary during the preparation of the signature card form, please prepare a new form, since erasures or corrections of any kind will not be acceptable. If you want to change individuals authorized to draw funds from the project, then please submit a new signature card. Any updated signature card will replace the previous one, so please be sure to include the names of <u>all</u> authorized individuals.

## Item # Explanation

- (1) a-d Type the names and titles, and provide the signatures of the officials of your organization who are authorized to make draws on project funds. (Note: **Two** signatures are required. We recommend showing three or four signatures to allow adequate signature coverage.)
- (2) Enter the typed name, title, date and signature of the Highest Elected Official, or other official duly authorized by the governing body of the Recipient, certifying the authenticity of the signatures of individuals listed in Item (1) a through (1) d. The person signing here must not be listed in Item (1) a through d.
- (3) Leave blank—Oregon Business Development Department will sign here.

Complete one form and return it to: Oregon Business Development Department 775 SUMMER ST NE STE 200 SALEM OR 97301-1280