

# Authorized Signature Form

For Grant Contracts, Reimbursement Payment Requests (RPRs) or  
Cash Advance Payment Requests (CAPRs)/Financial Status Reports (FSRs)

## Overview

To ensure compliance with the Minnesota Department of Employment and Economic Development (DEED) requirements, all organizations must complete and submit an Authorized Signature Form. The form must be kept on file and maintained with current, accurate information. No contracts, reimbursements, or official transactions will be processed without a valid Authorized Signature Form on record.

## Instructions

Organizations are required to designate at least two authorized signers to ensure appropriate back-up coverage. A new Authorized Signature Form must be submitted whenever there is a change in personnel authorized to sign Grant Contracts, RPRs or FSR/CAPR requests, a change in organizational address, or a change in authorized signing limits. A change in title or position of authorized personnel does not require submission of a new form if the individual's signing authority remains unchanged.

**Grantee Organization Name and Address:** Enter the full legal name and complete address of the organization.

**Printed Name and Signature:** Type the names of all individuals authorized to request funds, sign grants, and obtain signatures of each. If more than four individuals are authorized, use additional forms and label them sequentially (e.g., 1 of 2; 2 of 2).

**Certification of Authorizing Official:** The official responsible for certifying the authorized signers must provide their signature, title, and date.

# Authorized Signature Form

For Grant Contracts, Reimbursement Payment Requests (RPRs) or  
Cash Advance Payment Requests (CAPRs)/Financial Status Reports (FSRs)

Grantee Organization Name: \_\_\_\_\_

Grantee Organization Address: \_\_\_\_\_

**Signatures of up to four (4) individuals authorized to approve and sign Reimbursement Payment Requests (RPR), Cash Advance Payment Requests (CAPR) and/or Financial Status Reports (FSR):**

Only one signature of those listed is required  Any two signatures of those listed are required

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**Signatures of up to four (4) individuals authorized to sign DEED Grant Contracts:**

Only one signature of those listed is required  Any two signatures of those listed are required

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**I certify that the signatures above are of the individuals authorized to approve and sign Reimbursement Payment Requests (RPR), Cash Advance Payment Requests (CAPR), Financial Status Reports (FSR), or Grant Contracts for all DEED funding.**

Authorizing Official Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorizing Official Printed Name and Title \_\_\_\_\_