



UNIVERSITY OF AKRON RESEARCH FOUNDATION

SIGNATURE AUTHORIZATION FORM

Project Title: _____

Project Begin Date: _____ Project End Date: _____

Account Manager: _____

Campus Address: _____
 mail code bldg. room #

: Authorized Signature(s) for Non-Payroll Purchases and Expenditures

Signature: _____ Printed Name: _____

Date: _____ Title: _____

Signature: _____ Printed Name: _____

Date: _____ Title: _____

Signature: _____ Printed Name: _____

Date: _____ Title: _____

: Payroll on UARF accounts is handled through a University account using The University of Akron’s signature authorizations. Therefore, there are no UARF authorizations for personnel appointments and payroll on this form.

: For purchases over \$2,499 and for expenditures for community/public relations exceeding \$199, the signature of the account manager’s department chair/school director or dean (director/supervisor) is required.