

**NCI-FREDERICK  
SCIENCE APPLICATIONS INTERNATIONAL CORPORATION  
SIGNATURE AUTHORIZATION FORM**

Name: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_  
(Please Print)

**Organization:** (check only one)

- DCEG       NCI-DCP       NCI-OM       DMS       OTHER  
 NCI-CCR     NCI-DCTD     NIAID       SAIC-FREDERICK  
 NCI-DCB     NCI-OD       CRL         WISCO

**Activity:**       ADD             CHANGE         DELETE

**Approval Areas:** (check all that apply)

- Animals                                       Purchase Request: Unlimited       RTP Services: Unlimited  
 Library Services                             Capital Equipment                     Warehouse Requisition  
 Petty Cash                                     Computer Services                     Work Orders  
 Purchase Request<\$500                     RTP Services <\$500                     Controlled Materials  
 Purchase Request<\$2500                  RTP Services <\$2500                  Shipping

**\*FOR SAIC EMPLOYEES ONLY (Payroll Authorization)**

**Employee Number:**

**Activity:**       ADD             CHANGE         DELETE

**Authorized to Receive:**

- Personnel Reports  
 Time Cards  
 Payroll Statements

**Authorized to Approve:**

- Travel COA  
 Travel NON-COA  
 Time Cards

- Personnel Requisitions  
 Overtime

**Authorized Center Numbers:** (list additional centers on 2<sup>nd</sup> sheet if necessary)

Center Number TO & FROM		Directorate (Entire Directorate)	Division (Entire Division)
TO	FROM		
—			
—			

\_\_\_\_\_  
Employee (print/type)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor (print/type)

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contracting Officer (print/type)  
(Gov't. Only)

\_\_\_\_\_  
Contracting Officer Signature

\_\_\_\_\_  
Date

**Instructions:**

If NCI employee, forward to Contracting Officer, Attn: Donald Wheatley, Building 427  
Forward to the Finance Department – W. Zimmerman, TJ Drive/Room 202

EMPLOYEE SIGNATURE AUTHORIZATION PRACTICES

NCI-Frederick employees who have signature authorization must understand the responsibility of incurring costs under the operating contracts of the NCI-Frederick. All expenses incurred must be properly documented, authorized and reported. Compliance of these practices as stated in the NCI's Policies and Procedures, Federal Acquisition Regulations, Cost Accounting Standards, and Maryland Sales and Use Tax Regulations, insures the integrity of the NCI-Frederick Signature Authorization Program as internal control system.

Listed below are the key elements and guidelines to help you exercise your approval authority:

1. When signing a document as an approver, you are stating that you have reviewed the document and to the best of your knowledge:
  - a. The underlying transaction is valid and accurately reported on the document
  - b. The center number to which the cost is charged accurately reflects the organizational component receiving the benefit of the costs
  - c. The account number to which the cost is charged accurately reflects the nature of the cost
  - d. The cost to be incurred is in direct support of the NCI-Frederick contract effort
2. You may only approve documents for a center number and approval area for which you have been granted prior approval within the NCI-Frederick Signature Authorization Program. The costs associated with these documents must be within your signature authorization dollar limit.
3. You may not approve a document that affects you directly, such as your own expense report.
4. You may not approve a document, transaction, or other service not pertaining to your normal course of business responsibilities, even if it falls within your authorized center and account number or dollar limit. (Example, you may not enter into legal agreements that commit the resources of the NCI-Frederick)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Forward to W. Zimmerman, Building 244/111, along with Signature Authorization Form