

**SIGNATURE/DESIGNATION CARD
FOR CERTIFYING OFFICER**1. AGENCY LOCATION CODE *(Type multiple ALC's on reverse.)*

2. DEPARTMENT, ESTABLISHMENT, OR AGENCY

3. BUREAU OR OFFICE

4. TYPED NAME AND MANUAL OFFICIAL SIGNATURE OF CERTIFYING OFFICER *(USE BLACK INK ONLY)*5. CERTIFICATION AUTHORITY *(Check ONE box only. A separate SF 210 is required for each category.)* SF 1166—Voucher and Schedule of Payments *(or other approved form)* SF 1193, 1193A—Letter of Credit and 1194—Authorized Signature Card for Payment Vouchers on Letter of Credit

LOCATION OF DISBURSING OFFICE

6. I certify that the signature in item 4 is the official signature of the above named person who is designated (in writing) as a certifying officer to certify vouchers or letters of credit as indicated above.

SIGNATURE AND TITLE OF HEAD OF AGENCY OR DESIGNEE

DATE