



**INSTRUCTIONS FOR COMPLETING  
APPOINTMENT/TERMINATION RECORD - AUTHORIZED SIGNATURE**

This form may be used to:

1. Appoint disbursing officers and their agents, e.g., deputy disbursing officers, disbursing agents, paying agents, cashiers, change fund custodians, and collection agents.
2. Appoint certifying officers. Certifying officers are those individuals, military or civilian, designated to attest to the correctness of statements, facts, accounts, and amounts appearing on a voucher for payment.
3. Appoint accountable officials. Accountable officials are those individuals, military or civilian, who are designated in writing and are not otherwise accountable under applicable law, who provide source information, data or service to a certifying or disbursing officer in support of the payment process.
4. Appoint other individuals for which an appointing authority considers this form appropriate; see item 13.

**SECTION I.**

1. Enter the name of the commander/appointing authority.
2. Enter the commander/appointing authority's title.
3. Enter the commander/appointing authority's DoD component/organization location.
4. Enter the date the form is completed.
5. The commander/appointing authority must place his or her legal signature in the block provided. **Enter a digital signature in this item ONLY after completion of items 6 through 16, as this signature will "lock" those items.**

**SECTION II.**

6. Enter the appointee's name.
7. Enter the appointee's social security number. The full social security number is required for pecuniary liability determination purposes.
8. Enter the appointee's title.
9. - 11. Enter the name, complete address, and telephone number of the DoD component/organization activity to which appointed.
12. Enter the date the appointment is to be effective.
13. Mark X in the appropriate box indicating the purpose for the appointment. For "other", specify the type of appointment.
14. The appointing authority should identify the types of payments affected, but need only be specific as he or she considers necessary. Include any other pertinent information (e.g., system involved).
15. List all regulations the appointee must review and follow in order to adequately fulfill the requirements of the appointment.

**SECTION III.**

16. - 17. The appointee prints his or her name and enters his or her legal signature in the spaces provided.

**SECTION IV.**

Completing this section terminates the original appointment as of the effective date. If partial authority is to be retained, complete a new DD Form 577.

18. Enter the date the termination is effective.
19. The appointee will initial in the space provided acknowledging revocation of the appointment.
20. - 22. The appointing authority must place his or her name, title and legal signature in the spaces provided.