



SIGNATURE AUTHORIZATION

Required to sign all OKOHS subgrant documents

| PROJECT CONTACT/SECONDARY AUTHORIZED OFFICIAL INFORMATION | | | |
|--|-------|-------|-----|
| PRINT Name | | | |
| Title | | | |
| Agency | | | |
| Mailing Address | | State | Zip |
| Phone # | Fax # | Email | |
| Primary Contact Signature | | Date | |

| <u>OPTIONAL</u> Secondary Contact | | Authorized to sign subgrant documents? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If "yes," please sign below)</i> |
|--|----------------|---|
| PRINT Name | Title / Agency | |
| Email | Phone # | |
| Secondary Contact Signature | | Date |

| AGENCY/JURISDICTION CHIEF EXECUTIVE OFFICER – PRIMARY AUTHORIZED OFFICIAL INFORMATION | | |
|--|---------------|------|
| <small>City or County Official (Mayor, City Manager, County Commissioner)</small> | | |
| <i>I hereby authorize the individual(s) identified above to act on my behalf in coordination with the Oklahoma Office of Homeland Security (OKOHS) and to sign all documentation related to this subgrant.</i> | | |
| PRINT Chief Executive Officer Name | OKOHS Award # | |
| Title | Phone # | |
| Jurisdiction (City, County, etc.) | Email | |
| Mailing Address | State | Zip |
| Chief Executive Officer Signature | | Date |

Form Revised as of: September 10, 2007

*If any of the above information changes please submit a new **SIGNATURE AUTHORIZATION FORM** to OKOHS immediately.*