



Controller's Office Delegation of Authority Form INSTRUCTIONS

Purpose:

The basic purposes of the Controller's Office Delegation of Authority Form (*CODAF Form*) are:

- Assign signature authority by Financial Transaction Type (excluding "On-Line" Purchase Order or Requisition Approval)
- Make changes or deletions to authorized signer's information.

Where to obtain the Form:

The *CODAF Form* can be obtained from the Financial Management website, Procedures and Forms at:

<http://daf.csulb.edu/forms/financial/index.html>

Completed forms should be sent via campus mail (Hard Copy only) to University Controller's Office (FND-Room 280) – Attn: "Office Coordinator". The form will become effective upon receipt by the Office Coordinator.

How to Complete the Form:

New User: Please indicate with a check mark if applicant is a new user.

Change or Delete: Please indicate if applicant is requesting to change his/her signature authority or if the applicant should be deleted from the system.

Change: If you are adding or deleting partial authority, please check this box. Then prepare and submit a new form indicating the new delegation of authority, after the "Change" is in effect.

Delete: If you are completely deleting authority, please check this box, complete "Applicant Information" (Name and EmplID only), then skip to the "Approving Signatures" section to officiate the form.

Empl ID: This is your unique assigned PeopleSoft identification

Name: Your last, first, and middle initial

Phone: The applicant's extension in case we need further information regarding the request.

Fax: Applicant's fax number.

Title: Applicant's position title.



Dept: Applicant's department of residence

Div: Applicant's Division

Email: Applicant's email address for CSULB.

Applicant Signature: Applicant's signature is required here. Please sign as you will when approving the listed Transaction Types.

Finance Transaction Types Authority

This section is for individuals that have authority to sign approval of transactions according to the elections in this section. **Make sure you check the respective boxes to indicate all authority the applicant should have.**

Signature Authority

Enter the appropriate value/identifier into the respective column to identify which Department(s), fund(s), program(s), and/or project(s) which the applicant has signature authority for, of the specified Transaction Types checked on the form. Multiple rows should be completed to signify different value/identifiers for the same Transaction Types.

Do not put more than one value/identifier per cell.

CODAF Form Approving Signatures

Please follow your appropriate organizational guidelines for the proper signature approval of this form. At least one signature is required by the appropriate authorized person who is delegating the signature authority. This form does not supersede signature approval requirements or restrictions provided in CSU or CSULB policies (i.e. Gifts to Non-Employees).