UNIVERSITY OF CALGARY

ANNUAL AUTHORIZATION FORM

DATE	ANNUAL AUTHORIZATION NUMBER

SERVICE CENTRE NAME & ADDRESS	CONTACT INFORMATION
	SERVICE CENTRE ACCOUNTING INFORMATION

REQUESTOR NAME	DEPARTMENT	Maximum Annual Charge $_____
EMAIL ADDRESS	PHONE NUMBER	Start Date (DD/MM/YYYY)
		End Date (DD/MM/YYYY)

ANNUAL GOODS/SERVICES DESCRIPTION

Description	Price	Description	Price

SPECIAL INSTRUCTIONS/COMMENTS

PURCHASERS ON BEHALF OF THE DEPTID OR PROJECT BUDGET OWNER

Name (Last, First)	Comments	Start Date (DD/MM/YYYY)	End Date (DD/MM/YYYY)

ACCOUNTING INFORMATION (CHARTFIELDS)

Fund	Department ID	Program Code	Internal Code	Project Code	Activity Code
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DECLARATION & AUTHORIZATION (to be signed by DeptID/Project Budget Owner or Delegate)

By signing this Authorization Form, I am certifying that I have reviewed the schedule of fees as supplied by the Service Centre.   I agree to be charged for the use and/or consumption of these goods/services for the duration of this agreement at the rate(s) outlined in said schedule of fees, and that sufficient funds have been budgeted to cover the expenses.   I authorize the individual(s) listed above to request goods/services provided by the Service Centre on my behalf and to charge such purchases against my project and/or DeptID as shown in the accounting information section above.   These individuals do not supersede the current authority of the FSCM Delegates and are limited to transact on my behalf on the specified dates for this particular Service Centre.   Where applicable, I am attesting to the eligibility of these goods/services under the GRANTING AGENCY REGULATIONS and/or TERMS OF THE CONTRACT AGREEMENT and the general policies of the university.   For items charged to a research project, I further confirm that these items are not related to teaching activities and will be used solely for the purposes of research and activities directly related to the research projects to which these purchases are being charged.

DeptID/Project Budget Owner or Delegate Name (Please print)	Signature (DeptID/Project Budget Owner or Delegate)
Phone Number	Date

See Reverse of Form for Instructions/Field Descriptions

Annual Authorization Form Requirements

Annual Authorization Number – if used by Service Centre.

Service Centre Accounting Information –Chartfields (fund, project, activity, internal, etc.) where internal revenue/credits are to be recorded in PeopleSoft.

Requestor – must be DeptID/Project Budget Owner or FSCM Delegate.

Maximum Annual Charge – May be completed by budget owner if required.

Start and End Dates – Where possible use July 1-June 30; may span a maximum one year term.   If the project end date is less than one year from the start date, the project end date must be the Annual Authorization end date.

Description – Goods and/or services provided under the annual authorization.

Price – If based on a price list, such list must be attached to the Annual Authorization form or a link to the website where the price list is published may be inserted.   If the price list changes during the term of the Annual Authorization, the updated price list must be provided to the DeptID/Project Budget owner and a new Annual Authorization must be obtained.

Special Instructions – As required by DeptID/Project Budget Owner.   Examples: certain items to be charged to certain chartfields (project, activity, deptid, internal, etc.), specific percentages of cost to be charged to certain chartfields, certain items may only be purchased by certain authorized purchasers, etc.

Purchasers on Behalf of the DeptID or Project Budget Owner – Individual(s) who have been selected by the DeptID/Project Budget Owner to request/pickup goods and or services covered under the Annual Authorization.   These individuals do not take the place of, nor act in the capacity of a DeptID/Project Budget Owner or an FSCM Delegate.

Accounting Information - Chartfields (fund, project, deptid, internal, etc.) where IDB charges are to be recorded in PeopleSoft as provided by the DeptID/Project Budget Owner.

Declaration & Authorization – Must be exactly as shown.

Signature – Must be signed by the DeptID/Project Budget Owner or FSCM delegate.