



### Online Ordering Account Authorization

Please grant the individual(s) listed below permission to order on the state accounts provided, for which I am an authorized account signatory.

Name	Email	State Account(s)

Authorized Signatory (please print):

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Signature:

Date:

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Please submit this form by fax 7-4571, email at [purchasing@albany.edu](mailto:purchasing@albany.edu), or in person.