

### BOOKSTORE CHARGE AUTHORIZATION

The following individual(s) have authority to purchase and sign for items from the Bookstore for my department:

|                 |                |
|-----------------|----------------|
| _____           | _____          |
| Department Name | Account Number |
| _____           | _____          |
| Secretary       | Faculty Member |
| _____           |                |
| Other           |                |

Approved By:

\_\_\_\_\_  
V. President/Dean/Department Chair/Director

Date: \_\_\_\_\_