



## Delegation of Signing Authority Form Kamehameha Publishing

**TO WHOM IT MAY CONCERN,  
I HEREBY DELEGATE PUBLISHING MATERIAL REQUISITIONS THROUGH THE KS E-MALL SYSTEM:**

\_\_\_\_\_  
Requisitioner (Please print name and title)

\_\_\_\_\_  
(Signature)

**E-mail address to send login and password information for future orders through KS E-mail:**

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
Department/Division

\_\_\_\_\_  
Office Address/Location

\_\_\_\_\_  
Phone Number

***This authorization is for the purchase of Kamehameha Publishing materials through the KS E-Mall. The requisitioner is authorized to purchase materials for the following Department ID (Account Code is entered in during the checkout process).***

**DEPARTMENT ID:**

1.)	6.)
2.)	7.)
3.)	8.)
4.)	9.)
5.)	10.)

I have read the Kamehameha Schools Procurement Policies and associated procedures and in accordance with those policies; I do hereby delegate signing authority as noted above.

\_\_\_\_\_  
SIGNATURE OF DESIGNATOR/SUPERVISOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME & TITLE (please print)

***Form should be kept on file and be readily available as required by Internal Audit and/or Legal.***