# APPENDIX B
## AUTHORIZED SIGNATORY CARD

NATIONAL DISASTER RESILIENCY COMPETITION

### Authorized Signature Card for Request for Funds

| CDBG Grant Number: | Issued By: **California Dept. of Housing and Community Development**  
2020 West El Camino Avenue, Suite 400 (95833)  
P. O. Box 952054  
Sacramento, CA 94252-2054 |
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>Grantee Name:</strong></td>
<td>(1) <strong>Typed Name of Signer, Signature and Title:</strong></td>
</tr>
<tr>
<td></td>
<td>(2) <strong>Typed Name of Signer, Signature and Title:</strong></td>
</tr>
<tr>
<td></td>
<td>(3) <strong>Typed Name of Signer, Signature and Title:</strong></td>
</tr>
<tr>
<td></td>
<td>(4) <strong>Typed Name of Signer, Signature and Title:</strong></td>
</tr>
</tbody>
</table>

I certify that the signatures above are of the individuals authorized to request payment of funds under the grant cited above.

Typed or Printed Name of Authorizing Official (Grantee)  
______________________________  
Title  
______________________________  
Signature of Authorizing Official (Grantee)*  
______________________________  
Date

### Instructions

Funds requests require two signatures--the preparer and any one of the authorized signers listed on the signature card.

The name and/or title of the **authorizing official** must be identified in the resolution passed by the city council or governing body. **The resolution must be submitted along with the signature card.**

The authorizing official is certifying that persons listed on the signature card are authorized to sign the funds request.

A signature card must be completed for each grant. A new signature card must be submitted when there is a change in the name and/or title of the authorizing official. No erasures or corrections may appear on this signature card.