

**United States Department of Energy  
Energy Finance and Accounting Service Center  
Travel Arrangement and Program Manager Signature Card**

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

Position Title: \_\_\_\_\_

Routing Symbol: \_\_\_\_\_ Building: \_\_\_\_\_ Phone: \_\_\_\_\_

TAGS: { 'Ceeqwpv' Hwpf 'U{o dqri\*TAFS+': \_\_\_\_\_

Signature: \_\_\_\_\_

**Types of Documents Authorized (please check box)**

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- Approved Funding Program Change Request
- Verification of Funds Availability (Certs)
- Obligation Authorization (Approval of Miscellaneous Obligations)
- Invoice Payment Approval
- Local Travel Reimbursement
- TDY Traveler Authorization
- Travel Vouchers
- Actual Expenses on TDY Travel Authorization
- Relocation Authorization
- Other (specify) \_\_\_\_\_
- Other (specify) \_\_\_\_\_
- Other (specify) \_\_\_\_\_

I certify to the signature and authority of the above individual for the document noted. I, the authorizing official, have the authority which I am delegating to the individual.

\_\_\_\_\_  
(SIGNATURE OF AUTHORIZING OFFICIAL)

\_\_\_\_\_  
(PRINTED NAME AND TITLE OF AUTHORIZING OFFICIAL)