

**Accounts Payable Authorized Signature Form**  
 (For Districts for which King County, as Treasurer, Issues Payments)

**SECTION 1 – GENERAL INFORMATION**

Please complete each field below. For the "Number" field, enter the first 5 digits of your Fund Numbers. Typed/ electronic entries are preferred for readability.

District/Organization Name: \_\_\_\_\_ Number: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/ State/ Zip: \_\_\_\_\_

General Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

**Primary Contacts**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

**SECTION 2 –AUDITING OFFICER(S) DELEGATED WITH PAYMENT APPROVAL AUTHORITY (If Applicable)**

Complete the fields below for each Auditing Officer that has been delegated signatory authority in accordance with RCW 42.24.180. This RCW is intended to expedite the issuance of warrants by authorizing one or more persons signatory authority to approve warrant issuance before the board has acted to approve the claims. A copy of the resolution delegating this authority is required to accompany this form. When submitting Voucher Approval documentation, it is understood that any restrictions attached to an Auditing Officer's signatory authority will have been honored by the Auditing Officer. Due to the electronic voucher data submission process, King County does not monitor these restrictions.

Number of Required Auditing Officer Signatures for Payment of Claims: \_\_\_\_\_

**Auditing Officer Signatures**

	Name	Telephone	Email
Sign:	_____		
Print:	_____	_____	_____
Sign:	_____		
Print:	_____	_____	_____
Sign:	_____		
Print:	_____	_____	_____
Sign:	_____		
Print:	_____	_____	_____

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**SECTION 3 – BOARD MEMBERS – APPROVALS AND PAYMENT CERTIFICATION AUTHORIZATION**

*If an Auditing Officer with signing authority, per RCW 42.24.180, has not been delegated or, if such an Auditing Officer is delegated and any designated restriction is exceeded, board action is required for warrant issuance. As members of the board, the following persons are also authorized to sign for Approval and Payment Certification as per RCW 42.24.080 and other respective agency RCWs.*

**Number of Required Board Member Signatures for Payment of Claims: \_\_\_\_\_**

**Board Member Signatures**

	Name	Telephone	Email
Sign:	_____		
Print:	_____	_____	_____
Sign:	_____		
Print:	_____	_____	_____
Sign:	_____		
Print:	_____	_____	_____
Sign:	_____		
Print:	_____	_____	_____
Sign:	_____		
Print:	_____	_____	_____
Sign:	_____		
Print:	_____	_____	_____

**I attest the above information is true and accurate and the signatures herein are authorized as described. Our district will execute a new form with King County Accounts Payable as information or signatories change:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Chairperson/ President

**District/Organization Name:** \_\_\_\_\_

**Please send King County Accounts Payable this original completed form and, if applicable, a copy of a resolution delegating signatory authority (*sample attached*). Incomplete forms will be returned. Please send documents to:**

King County Accounts Payable  
 Attn: Special Districts  
 401 5th Avenue, Room 323  
 Seattle, WA 98104

If you require assistance completing this form, please contact (206) 263-9400 or SpecialDist.AP@kingcounty.gov.

**Sample Auditing Officer Delegation Resolution**

*(Resolution is required if delegating an Auditing Officer to expedite payment of claims)*

*(District Name and Number)*

Resolution Number \_\_\_\_\_

**APPOINTING OF AUDITING OFFICER(S) FOR THE PURPOSE OF AUTHORIZING THE ISSUANCE OF WARRANTS AND ELECTRONIC TRANSACTIONS PRIOR TO BOARD OF COMMISSIONERS APPROVAL**

**WHEREAS** there may be circumstances when the Board of Commissioners does not meet prior to a day in which they would need to approve vouchers for the District’s warrants and claims;

**WHEREAS** there is a need by the District to process warrants and electronic payments in a timely and consistent manner;

**WHEREAS** it would be of financial benefit to appoint Auditing Officer(s) to certify the voucher approval document for the correct and certified submission of vouchers to the King County Finance Office without awaiting a Commissioners meeting to authorize specific payments;

**WHEREAS** RCW 42.24.180 authorizes the issuance of warrants before approval of the vouchers by the Board of Commissioners in order to expedite the payment of claims;

**WHEREAS** this Agency shall enact the following policies and procedures pursuant to RCW 42.24.180:

1. All routine operating claims against *(district name)* will be pre-audited and signed by the Auditing Officer
2. The Auditing Officer shall be bonded for no less than \$50,000 to assure the faithful discharge of their duties
3. *(Your policy name/number)* establishes the necessary purchasing and disbursing procedures that implements effective internal control for issuance of warrants and claims
4. The Board of Commissioners shall review and approve the claims paid at its next regularly scheduled public meeting; and
5. If the Board of Commissioners disapproves some claims, the Auditing Officer will recognize these claims as receivables of the District and will pursue collection diligently until the amounts are either collected or the Board of Commissioners approves the claims

**THEREFORE BE IT RESOLVED**, that the Board of Commissioners of *(district name and number)* does hereby authorize the Auditing Officer(s), *(includes name(s))*, to submit vouchers for payment and disbursement in accordance with *(policy name/number from above)* prior to the Board taking action to approve said claims;

**ADOPTED** by the Board of Commissioners of *(district name and number)* at a regular meeting held on this \_\_\_\_ day of \_\_\_\_\_, *(year)*.

**ATTEST:**

\_\_\_\_\_  
By: Board Secretary

\_\_\_\_\_  
By: Commissioner

\_\_\_\_\_  
By: Chairperson/ President

\_\_\_\_\_  
By: Commissioner

\_\_\_\_\_  
By: Commissioner

\_\_\_\_\_  
By: Commissioner