

Request for Delegation of TEM Duties

Requestor **MUST** sign each printed expense report prior to submitting for approval.

Requestor's signature is required on each printed expense report prior to payment processing.

Requestor Printed Name:	Delegate's Printed Name	<p>I, as the Requestor, acknowledge that even though I have delegated authority to another to enter my Travel and Expense forms, I am still responsible for understanding the Travel Policy, and for the accuracy, timeliness, and completion of the reports. Once delegation is granted, I a</p> <p>Requestor's Signature:</p> <p>_____</p> <p>Date Signed:</p> <p>_____</p>	
Requestor Employee ID:	Delegate's Employee ID		
Requestor's PSoft User ID:	Delegate's PSoft User ID		
Department Name:	Department Name		
Department ID:	Department ID		
Request Date	OIT Processed Date		