

RESOLUTION 2015/16 - #26
of the Governing Board of the

Novato Unified School/College District
County of Marin, State of California

AUTHORIZATION TO SIGN ON BEHALF OF THE GOVERNING BOARD

Novato, California

June 21, 2016

City

Date

Pursuant to the provisions of Education Code Section 42630 to 42633 (School Districts) and 85230 to 85233 (Community College Districts) and other legal provisions, the members of the governing board of the above-named school/college district hereby authorize the officer or employee whose name and signature appear below to sign orders and other documents on behalf of the governing board of said school/college district during the period 2016-2017 (not to exceed one fiscal year), subject to further board action limiting or extending this authority and notification to the County Superintendent and the County Auditor of such action.


Ivan Chaidez

IS AUTHORIZED TO SIGN THE FOLLOWING ON BEHALF OF THE BOARD:

Name (Typed)

Assistant Superintendent, Education Services

Title


Signature

Please Indicate
"Yes" or "No"

Payroll & Retirement

| | | |
|--|---|-------|
| Overpayment / Adjustment | x | _____ |
| Retirement Election Forms | x | _____ |
| Sick Leave Transfers | x | _____ |
| Sick Leave Service Credit Calculations | x | _____ |

Cash Receipt / Disbursement Authorization

| | | |
|---|---|-------|
| Endorsement Checks..... | x | _____ |
| Journal Vouchers Requests..... | x | _____ |
| Loan Request –Tax Anticipation Note (TAN) | x | _____ |
| Payroll Order Certification | x | _____ |
| Vendor Payment Certification | x | _____ |
| Deposit Transmittal..... | x | _____ |

Attendance Reporting

| | | |
|---------------------------------|---|-------|
| Attendance Certifications | x | _____ |
|---------------------------------|---|-------|

State and Federal Reporting

| | | |
|---|---|-------|
| Audit Findings-Certification of Corrective Action | x | _____ |
| Certification of Federal Funds | x | _____ |
| Independent Auditor Selection Form | x | _____ |
| Salary and Benefit Schedule (J90)..... | x | _____ |

| | | |
|-----------------------------|---|-------|
| Other (Please Specify)..... | x | _____ |
|-----------------------------|---|-------|

Signed by a majority of trustees (Original signatures required on all copies):

