San Bernardino County Superintendent of Schools

Ted Alejandre
County Superintendent

*Transforming lives through education*

**SAN BERNARDINO COUNTY SUPERINTENDENT OF SCHOOLS**
**DISTRICT FINANCIAL SERVICES**

# Authorization for Warrant Pickup

District Name: _____ District No. _____

This form authorizes the individuals listed below to pick up payroll/commercial warrants on behalf of the district named above. Authorization will remain in effect until cancelation is submitted in writing, or an updated Authorization form is submitted. Election of the school district, with respect to the procedure for handling payroll and commercial warrants routinely, is not modified by this form.

| **Name of Individual:** | **Signature of Individual:** |
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Authorized Agent: _____ Date: _____

(Assistant Superintendent of Business)

Print Name: _____

NOTE: PROOF OF IDENTIFICATION MAY BE REQUIRED AT TIME OF PICK UP (DRIVERS LICENSE)