

September 12, 2013

United States Department of Agriculture

Animal and Plant Health Inspection Service

Markeling & Regulatory Programs Business Services

4700 River Road Riverdele, MD 20737 TO:

APHIS Agreements Specialists, Authorized Departmental Officer's

Designated Representatives, and Authorized Departmental Officers

FROM:

Michael Peranio

FMD, Financial Service Branch Agreements Services Center

SUBJECT:

Accepting Copies of Certain Original Signature Documents Related to

Cooperative Agreements and Grants

Authorities:

7 CFR 3015 Uniform Federal Assistance Regulations, APHIS manual

chapter 4.

The following guidance is being implemented, to increase efficiency in processing cooperative agreements and grants and their related payment requests. Effective immediately, APHIS will accept copies of originally signed documents via paper copy, email or fax from a cooperator as long as APHIS has on file the original notice sent by the cooperator that delegate's signatory authority on their behalf.

The cooperator must submit to APHIS a formal notice to delegate signatory authority to persons within that organization. Upon receipt of this formal delegation, APHIS will accept copies of the original signature documents from these individuals.

Whenever there is a change in authorized signers, the cooperator must notify APHIS in writing immediately, please see a sample authorized signature form attached. This new policy is in effect for new and continuation agreements starting 9/12/2013.

Copies of original signatures documents will be accepted for the following documents:

- Notice of Award (including new, continuations, or revisions)
- SF-424 Application for Federal Assistance
- SF-424b Assurances Non-Construction Programs
- Certification Regarding Lobbying, SF-LLL Disclosures of Lobbying Activities
- SF-270 Request for Advance or Reimbursement
- SF-425 Federal Financial Report
- Inventory Report
- Prior Approval Request



Original signatures are still required for the following document:

Authorized signature form

Please contact your ASC representative if you have any question or need additional information, a list of your representatives can be found at:

http://www.aphis.usda.gov/mrpbs/contact_us/fmd_agreements_grants.shtml .

Attachment: 1 Sample Authorized signature.docx

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Attachment 1.

Authorized Signatures

List the name and title of those individuals in your organization who are authorized to execute
agreements and MOUs and/or instruments on behalf of the organization, including financial
reports and payment requests. Specify if more than one signature is required.

Name (Typed) Gladys M González	Signalure Laboratory Laboratory	Title Dean and Director
Name (Typed) Carlos E Ortiz Malave	Signature S-Of	Halce Title Associate Dean AES
Name (Typed) Angel Cuyar	Signature	Title Financial Officer - AES
Name (Typed)	Signature	Title
Name (Typed)	Signature	Title
Name (Typed)	Sígnature	Title
Name (Typed) `	Signature	Title

I certify that the names of the Individuals identified on this listing are current as of the date of execution below and that these individuals are authorized to sign Agreements and other legally binding documents related to Agreements with the Animal Plant Health Inspection Service – APHIS on behalf of (University of Puerto Rico, Agricultural Experimental Station. I understand and agree that the University of Puerto Rico, Agricultural Experimental Station has a duty to ensure that this listing is immediately updated and communicated to APHIS whenever any of the authorized signatories above is no longer employed or have their responsibilities changed resulting in their no longer being authorized to sign Agreements with APHIS or whenever new signatories are

For privacy purposes DO NOT ATTACH any documentation containing personal information, such as bank account numbers, social security numbers, driver's licenses, home addresses, social security cards or any other personally identifiable information that you do not want released as part of a public record. APHIS reserves the right to publish the names and titles of authorized signatories of contractors.

COOPERATOR LEGAL NAME: University of Presto Rice at Mayaguez

Tille: Acting Charcellor Telephane 727-252-4040

Email: Rector upra @ upr. ecly

* This would be the person that can certify signatures above are valid and authorized to sign official documents such as the agreement, MOU, all required forms.

Authorized signature.docx