

P.O. Box 11415 Oklahoma City, OK 73136 (405) 425-7296 Office • (405) 425-7295 Fax www.homelandsecurity.ok.gov

SIGNATURE AUTHORIZATION

Required to sign all OKOHS subgrant documents

PROJECT CONTACT/SECONDARY AUTHORIZED OFFICIAL INFORMATION					
PRINT Name					
Travis King					
Title					
Fire Chief					
Agency Norman Fire Department					
Mailing Address		State	Zip		
415 E. Main Street		ОК	73071		
Phone # Fax #	Email	OIL	73071		
405-292-9780 405-292-9785	travis.king@normanok.gov				
Primary Contact Signature		Date			
OPTIONAL Secondary Contact Authorized to sign subgrant documents? Yes No (If "yes," please sign below)			documents? Yes No		
PRINT Name	Title / Agency	picase sign belony			
Section and a section					
Email	Phone #				
Secondary Contact Signature		Date			
AGENCY/JURISDICTION CHIEF EXECUTIVE OFFICER –					
PRIMARY AUTHORIZED OFFICIAL INFORMATION					
City or County Official (Mayor, City Manager, County Commissioner)					
I hereby authorize the individual(s) identified above to act on my behalf in coordination with the Oklahoma					
Office of Homeland Security (OKOHS) and to sign all documentation related to this subgrant.					
	To sign an accum		TO THIS SUOST CHIL.		
PRINT Chief Executive Officer Name Lynne Miller		OKOHS Award # 860.062			
Title Lyttile Willer		Phone #			
Mayor		405-366-5402			
Jurisdiction (City, County, etc.)		Email			
City of NOrman		mayor@normanok.gov			
Mailing Address		State	Zip		
P.O. Box 370		OK	73070		
	-				
Chief Executive Officer Signature Date					
Form Revised as of: September 10, 2007					

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If any of the above information changes please submit a new <u>SIGNATURE AUTHORIZATION FORM</u> to OKOHS immediately.