

....., date

.....
(first and last name)

.....
(organizational unit)

AUTHORIZATION

I hereby authorize Mr./Mrs.

.....

a holder of the personal ID, series and number

to collect my receivables for

.....
(employee's handwritten signature)

.....
(date, acknowledgment of the employee's handwritten signature
by the head of the organizational unit employing the employee or an
employee of the Human Resources Department of the University)