



Signature Sample Sheet

Please complete this form and include a signature that can be imprinted on checks and other forms produced for your district by Kalamazoo RESA Information Systems.

Please type or print the information below:

District Name _____

Date to begin using signature on forms ____ / ____ / ____

Include signature on:

____ Financial Accounting Checks

Signature should only be included on the specific funds/accounts listed below:

____ Payroll Checks

____ Other forms (indicate below):

Please enter signature(s) in the box below. Note: Signature must not extend into the black border.



Please type or print:

Name of signer _____

Title of signer _____

Name of signer _____

Title of signer _____

When complete, please return this form to:
Kalamazoo RESA, Technology Services, Information Systems Support Help Desk.

Thank you.