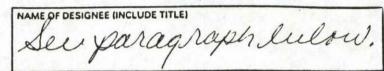
INSTRUCTIONS

- . DETERMINE STATUTORY AUTHORITY
- DETERMINE POWERS AND/OR DUTIES
- . COMPLETE FORM AND SIGN
- . SUBMIT TO SECRETARY OF STATE
- . SEND COPIES TO AFFECTED AGENCIES
- EXECUTE SEPARATE RESCINDING ORDER FOR PREVIOUS HOLDER OF THIS POSITION AND SUBMIT TO THE SECRETARY OF STATE





DELEGATION / RECISION OF AUTHORITY

DEPARTMENT (BUREAU, AGENCY, ETC.)	PERSON DELEGATING/RESCINDING (INCLUDE TITLE)
Department of Employee Relations	Linda Barton, Commissioner
I HEREBY DELEGATE THE FOLLOWING POWERS AND/OR DUTIES TO THE ABOVE NAMED DESIGNEE, EFFECTIVE: 7-28-92 Month Day Year	AUTHORITY CITED: YURSUANT TO: M.S. 15.06, SUBD. 6 PURSUANT TO: M.S. 16B.06, SUBD. 2 PURSUANT TO:
☐ SIGN PERSONNEL TRANSACTIONS	SIGN PAYMENT BATCH COVER SHEETS
SIGN PAYMENT TRANSACTIONS	PICK UP PAYROLL WARRANTS
SIGN PAYROLL ROSTERS	SIGN PURCHASING DOCUMENTS
EXECUTE CONTRACTS	OTHER (EXPLAIN)
Please rescind signature authority for the f	following: Janet Nelson, Anne Morris,
Charlene Hughes, Penny Whitten, Lance Teachw	worth, James Schwebach, Elaine Johnson,
Ann O'Brien, Pat Anderson, Robert Burke, Rob	ert Schram, Ann Gilles, Joanna Hartwig,
Hy Rosenstein, Stephanie Hanson, Richard Th	orkee
	TY ON FILE FOR THE ABOVE NAMED
DELEGATING RESCINDING AUTHORITY	DESIGNEE
THE SIGNATURE OF THE COMMISSIONER OF ADMINISTRATION IS REQUIRED ONLY IF THE DELEGATION IS PRICE SUBD. 2 (CONTRACTS). SIGNATURE	► RESERVED FOR USE BY THE SECRETARY OF STATE
APPROVED, COMMISSIONER OF ADMINISTRATION Copies to:	STATE OF MINNESOTA DEPARTMENT OF STATE FILED
	AUG 27 1992
	Joan anderson Grove