MINNESOTA DELEGATION/RESCISSION OF AUTHORITY

This document is a public record and is available for public inspection. Please read the instructions on the back of this form before completing it.

| 1. DEPARTMENT (AGENCY, BUREAU, ETC.) Information Technology Division | 2. NAME OF DESIGNEE (INCLUDE TITLE) Dean Buker, Acting ITD Deputy Director |
|--|--|
| 3. PERSON DELEGATIN Sue Dosal, St | G/RESCINDING (INCLUDE TITLE) ate Court Administrator |
| 4. Choose one of the following actions: _X _ I hereby DELEGATE the powers and/or or listed in No. 6 to the above named designee, effective: | luties I hereby RESCIND all prior delegations of authority on file for the above named person effective: Month Day Year |
| 5. AUTHORITY CITED: (Please check all that apply) | Pursuant to: M.S. 15.06, Subd. 6 Pursuant to: M.S. 16C.03, Subd. 16 (By the Commissioner of Administration) X Pursuant to: M.S480.15 |
| 6. If you are delegating powers and/or duties | s, mark the appropriate line(s) below. |
| _XEXECUTE CONTRACTS (Provide details below) | _X SIGN PURCHASING DOCUMENTS (Provide details below) |
| OTHER (Provide details below) | |
| DETAILS Delegation limited to spend Specified in the "Procureme | ing authorization level for Directors ent Policies and Procedures". |
| 7. SIGNATURES DELEGATING/RESCINDING AUTHORIT | |
| 8. Copies to: RESERVED FOR USE BY THE SE | 231-12 |