



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION - Child Nutrition Services  
 PO BOX 47200 · OLYMPIA WA 98504-7200  
 360-725-6200 · TTY 360-664-3631

**Fresh Fruit & Vegetable Program  
 SIGNATURE AUTHORITY**

<b>LOCAL EDUCATION AGENCY (LEA):</b>	<b>TELEPHONE:</b>
<b>MAILING ADDRESS:</b>	

**INSTRUCTIONS:**

By signing this form, I certify that the information transmitted is complete and accurate in accordance with the Fresh Fruit and Vegetable Program (FFVP) regulations.

I accept responsibility to maintain the integrity of the e-mail addresses used to submit claims and any sensitive program messages. I understand that I will be responsible for the content of the information transmitted to OSPI Child Nutrition Services. If the contact information changes, I will notify OSPI Child Nutrition Services immediately.

If the ultimate responsibility for submitting information is no longer mine, I will notify the authorized designated LEA official to terminate my access.

**Return completed form to:** OSPI – Child Nutrition Services, P.O. Box 47200, Olympia, WA 98504-7200.  
 It is also acceptable to scan and e-mail to [cns.supportstaff@k12.wa.us](mailto:cns.supportstaff@k12.wa.us) or call 360-664-9397.

Print Name	Title	E-mail Address	Signature
Assigned responsibility:	<input type="checkbox"/> Application	<input type="checkbox"/> Claims	

Print Name	Title	E-mail Address	Signature
Assigned responsibility:	<input type="checkbox"/> Application	<input type="checkbox"/> Claims	

Print Name	Title	E-mail Address	Signature
Assigned responsibility:	<input type="checkbox"/> Application	<input type="checkbox"/> Claims	

As the authorized designated LEA official, I will be responsible for submitting a new signature authority form in the event that there is a change in personnel or job duties. **The submission of a new form will terminate all users from the previous form.** By signing this form, I accept full responsibility to administer and operate the program in accordance with FFVP regulations.

**I understand that this form is equivalent to an original signature for purposes of official documentation. It will become part of the permanent file.**

<b>Name of Designated Official</b>	<b>Title</b>	<b>Signature</b>	<b>Date</b>