

# DELEGATION OF AUTHORITY

BUREAU OF THE FISCAL SERVICE, KANSAS CITY FINANCIAL CENTER  
P.O. BOX 12599-0599, KANSAS CITY, MO 64116



Date Completed: \_\_\_\_\_ Effective Date: \_\_\_\_\_

## SECTION I – DESIGNATION AND RE-DESIGNATION

In accordance with the authority vested in me by the head of this agency or his/her designee, I hereby delegate to the individual whose name, title, and signature samples appear below, the authority to:

- Designate Certifying Officers Authority  MAY /  MAY NOT Be Re-delegated
- Other (specify): \_\_\_\_\_ Authority  MAY /  MAY NOT Be Re-delegated

Comments: \_\_\_\_\_

### TYPE OF DELEGATION OR REVOCATION ACTION: [CHECK ONE]

- Original Designation
- Re-Delegation
- Revocation

## SECTION II – DESIGNEE

Full Legal Name: First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_  
 Agency: \_\_\_\_\_ Title: \_\_\_\_\_  
 Bureau: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Division: \_\_\_\_\_ Email: \_\_\_\_\_  
 Head of Agency  YES  NO

## SECTION III – SIGNATURE SAMPLES OF DESIGNEE [Designee must sign within all 4 boxes in BLACK INK]

Ink	Ink
Ink	Ink

## SECTION IV – DESIGNATOR SIGNATURE [Designator must sign within the box in BLACK INK]

Ink	Title: _____ Phone: _____ Email: _____ Agency: _____ Bureau: _____ Division: _____
Full Legal Name: _____	

## SECTION V – RETURN ADDRESS OF DESIGNATOR

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SECTION VI – TO BE COMPLETED BY THE FISCAL SERVICE

Reference Number: \_\_\_\_\_  
Verified Date: \_\_\_\_\_  
Verified By: \_\_\_\_\_

## **INSTRUCTIONS FOR FS FORM 2958DO**

1. This form is for use by individuals authorized by the head of an agency (or his/her designee) to delegate to authorities, such as designating Certifying Officers, to other individuals in the agency. The form must be submitted to the Bureau of the Fiscal Service.
2. Delegations/Designations are valid for a period of two years from the effective date. At the end of that period they will expire, unless a delegation renewal is submitted to the Bureau of the Fiscal Service. This form may be used for original delegations, renewals, and revocations.
3. For "Effective Date," enter the date that the delegation is to become effective. The actual effective date will be the latter of the requested effective date, or the date the delegation is accepted by Fiscal Service.
4. Only one individual may be delegated or revoked authority per form.
5. Completed forms should be mailed to:  
BUREAU OF THE FISCAL SERVICE  
KANSAS CITY FINANCIAL CENTER  
PO BOX 12599-0599  
KANSAS CITY, MO 64116

### **SECTION I**

- More than one box may be checked for type of authority to be delegated.
- Both the Designate Certifying Officer and the Other boxes should be checked for Head of Agency (HOA) Self-Delegations.
- For each box checked, authority to re-delegate must be indicated by checking either the "MAY" or "MAY NOT" block, for that item, as appropriate. Either the "MAY" or "MAY NOT" box must be checked for each type of delegation authority checked. For HOA Self-Delegations, the "MAY" box should be checked for ALL authorities.
- Enter pertinent information in the Comments field, such as Designee Name Change, etc.
- Check the appropriate box for "Type of Delegation or Revocation Action." Only one block may be checked.
  - Check "Original Delegation" for new delegations.
  - Check "Re-Delegation" for renewals of existing delegations.
  - Check "Revocation" to revoke all authority that was originally delegated. If partial authority is to be retained from the original delegation, a new form FS Form 2958DO must be submitted delegating that authority again.

### **SECTION II**

- Enter the Full Legal Name of the Designee.
- **The Head of Agency (HOA) is defined in the Treasury Financial Manual, Volume I Part 4A, Chapter 3000. Only the HOA will check the "Yes" box and sign the signature boxes in Section III & IV to self-delegate.** A signed letter on agency letterhead must also accompany this completed FS Form 2958DO indicating the individual is the Head of Agency.

### **SECTION III**

- Designee must sign within all four boxes.
- All signatures must be handwritten originals.
- All signatures must be clearly legible in **BLACK INK** for reproduction purposes.
- Designee must sign in the same manner as he/she will be using on future documents to be submitted to Fiscal Service. A new FS Form 2958DO with updated signature samples must be submitted if a substantial change in the form of the Designee's signature occurs.

### **SECTION IV**

- All forms FS Form 2958DO must be signed in this section by an authorized Delegator, whose authority will be substantiated by Fiscal Service prior to processing of the action requested in Section I.
- Signature must be within the box and clear and legible, using **BLACK INK** for reproduction purposes.
- A verified copy of FS Form 2958DO will be returned directly to the Delegator, at the address specified in Section V.
- Delegators are cautioned to review a verified copy to ensure that no changes to FS Form 2958DO have occurred between when the form was signed and when it was accepted by Fiscal Service.

### **SECTION V**

- Must be completed to reflect the return address of the Delegator signing in Section IV.

### **SECTION VI**

- Will be completed by Fiscal Service.
- If verified date is later than the effective date listed on the form, the verified date will replace the effective date listed and become the actual effective date.

#### **PRIVACY ACT STATEMENT**

**AUTHORITY:** 5 U.S.C. 301 and 31 U.S.C. 3321, 3325, authorize the collection of this information.

**PURPOSE:** These records are collected to allow Federal agencies to authorize the designation of those individuals appointed to serve in disbursing roles, and to allow Fiscal Service to maintain records of such appointments, records of any subsequent revocations or renewals in those roles, and document the authority of the disbursing actions taken by those individuals in execution of their roles.

**ROUTINE USES:** These records may be used by Fiscal Service Payment Management employees to verify the authority of the heads of agencies sending these forms, received to designate, revoke, and renew individuals appointed to serve in disbursing roles, and to authorize those designations. Additionally, this information may be provided to appropriate Federal agencies responsible for investigating or prosecuting the violations of, or for enforcing or implementing, a statute, rule, regulation, or order, where the disclosing agency becomes aware of an indication of a violation or potential violation of civil or criminal law or regulation.

**DISCLOSURE:** Furnishing this information is voluntary; however, failure to provide the requested information may result in not being considered for a specific disbursement-related function.