

**University of Miami - Disbursements Office**  
**e-CHECK ACCOUNT APPROVAL FORM**  
 Electronic Signature Card – Account Load for eCheck Requisitions via UMeNet  
 Mail to: Allison Gilbert Room 750 Gables One Tower, Locator: 2979

I, \_\_\_\_\_ authorize approval on my behalf for all electronic  
Print Name  
 check requisitions generated by the UMeNet/Ariba system as follows:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**Signature – Departmental Administrator      Date      Department Name      Dept/Sub-Dept. No.**

Check one box. Approval will be either for all accounts or only specific accounts identified for the (sub) department.

All Accounts **or**  Specific Accounts (please list): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Level 1 Approver      Approval Threshold: over \$0.00**

1 Name: \_\_\_\_\_ Signature \_\_\_\_\_  
Print Name

2 Name: \_\_\_\_\_ Signature \_\_\_\_\_  
Print Name

3 Name: \_\_\_\_\_ Signature \_\_\_\_\_  
Print Name

**Level 2 Approver (optional)      Approval Threshold: starting over \$\_\_\_\_\_**

1 Name: \_\_\_\_\_ Signature \_\_\_\_\_  
Print Name

2 Name: \_\_\_\_\_ Signature \_\_\_\_\_  
Print Name

**Level 3 - Dean/Chair/Dept Head Level Approval Threshold:  $\geq$ \$25,000 or other: \$\_\_\_\_\_**  
Specify amount less than \$25,000

Name: \_\_\_\_\_ Signature \_\_\_\_\_  
Print Name

***Note: Requests \$50,000 and over require VP level approval.***

For Disbursements Office Use:

\_\_\_\_\_  
 eCheck Requisition Data Custodian      Date