

**RECOMMENDED DISTRIBUTIONS  
FOR  
NEW SUPERINTENDENT FORMS**

| <b>Form</b> | <b>Title</b>  | <b>Dist.<br/>Files</b> | <b>County<br/>Treasurer</b> | <b>OSPI</b> | <b>County<br/>Auditor</b> | <b>ESD</b> |
|-------------|---|------------------------|-----------------------------|-------------|---------------------------|------------|
| A           | Oath of Office  | X                      |                             |             | X                         | X          |
| B           | Certificate of Manual Signature*  | X                      |                             |             | X                         |            |
| C           | Authorization of Facsimile Signature  | X                      |                             |             |                           |            |
| D           | Authorization of Warrant Signature  | X                      | X                           |             |                           |            |
| E           | Authorization to Invest Funds   | X                      | X                           |             |                           |            |
| F           | Designation of District Agent   | X                      |                             |             | X                         |            |
| G           | Designation of Auditing Officers  | X                      |                             |             |                           |            |
| H           | Certified Signatures of District Personnel<br>Authorized to Sign School Construction<br>Project Documents |                        |                             | X           |                           |            |
| I           | Certificate of Appointment or Election of<br>School District Director                                     | X                      |                             | X           | X                         | X          |
| J           | Instructions for Completing Certificate of<br>Election or Appointment Form                                | X                      |                             | X           | X                         | X          |

\* Must also be filed with Secretary of State

State of Washington  
SUPERINTENDENT OF PUBLIC INSTRUCTION  
Olympia, Washington

**OATH OF OFFICE**

STATE OF WASHINGTON, County of \_\_\_\_\_, ss.

I, \_\_\_\_\_, do solemnly swear (or affirm) that I will support the Constitution of the United States and the state of Washington and will faithfully perform the duties of Superintendent/Secretary of \_\_\_\_\_ School District No. \_\_\_ in the county of \_\_\_\_\_, state of Washington, according to the best of my ability.

Signed: \_\_\_\_\_

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

**SUBSCRIBED AND SWORN TO** (or affirmed) before me this day of \_\_\_\_\_, 20\_\_.

Signed: \_\_\_\_\_  
(official administering oath)

\_\_\_\_\_  
(title of official)

Note: Signatures must be acknowledged by a district superintendent, a notary public, or other official authorized to administer oaths.

**CERTIFICATE OF MANUAL SIGNATURE**

\_\_\_\_\_  
(Sample of Manual Signature)

I, the undersigned affiant, being first duly sworn on oath, depose and say:

A. My name \_\_\_\_\_  
(print or type)

B. I have been duly chosen and am qualified and acting as  
\_\_\_\_\_ for \_\_\_\_\_  
(name of position) (name of municipality)

C. The signature above is my true manual signature.

\_\_\_\_\_  
Signature

**SUBSCRIBED AND SWORN TO** (or affirmed) before me this day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
*Notary Public in and for the state of  
Washington, residing in \_\_\_\_\_  
County*

Note: This affidavit is made to comply with Ch. 86, WA Sess. Laws of 1969

**AUTHORIZATION OF FACSIMILE SIGNATURE**

Board Resolution No. \_\_\_\_\_

**WHEREAS**, Chapter 86, Laws of 1969, as codified in RCW 39.62 authorizes the use of facsimile signatures by any public officer in lieu of a manual signature to execute any "public security" or any "instrument of payment"; and

**WHEREAS**, the statute further requires that before any authorized officer may use a facsimile signature plate or stamp, he/she must file a manual signature with the Secretary of State, duly certified while under oath; and

**WHEREAS**, \_\_\_\_\_, Superintendent/Secretary of the Board, has filed a Certificate of Manual Signature, duly certified under oath, with the Auditor of \_\_\_\_\_ County.

**NOW, THEREFORE, BE IT RESOLVED** that the facsimile plate or stamp, as imprinted below, for \_\_\_\_\_, Superintendent/Secretary, be accepted for use in lieu of a manual signature on any public security or any instrument of pay of \_\_\_\_\_ School District No. \_\_\_\_\_.

**ADOPTED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Facsimile: \_\_\_\_\_

\_\_\_\_\_  
Board President                      Vice-President                      Board Member

\_\_\_\_\_  
Board Member                      Board Member

**ATTEST:**

\_\_\_\_\_  
Superintendent, Secretary to the Board

**AUTHORIZATION OF WARRANT SIGNATURE**

Board Resolution No. \_\_\_\_\_

**WHEREAS**, \_\_\_\_\_ has been designated as Superintendent/Secretary to the Board of School District No. \_\_\_\_\_ effective \_\_\_\_\_; and

**WHEREAS**, the Secretary to the Board is required to sign all warrants ordered to be issued by the Board of Directors; and

**WHEREAS**, the number of payroll and all accounts payable warrants issued each month by the School District if signed personally by the President of the Board would impose too great a task.

**NOW, THEREFORE, BE IT RESOLVED** by the Board of Directors of \_\_\_\_\_ School District No. \_\_\_\_\_, \_\_\_\_\_ County, Washington, as follows.

- A. After the Board has audited all payrolls as provided in RCW 28A.330.090, authorization be given to the Board Secretary to draw and sign said warrants which will be specified by date, number, name, and amount on the Payroll Warrant Register to be processed to the County Treasurer. The Payroll Warrant Register is to be signed by the President of the Board, or in his/her absence, the Vice-President or any Board member and countersigned by the Secretary to the Board, as provided by RCW 28A.330.080.
- B. After the Board has audited all bills as provided by RCW 28A.330.090, authorization be given to the Board Secretary to draw and sign said warrants which will be specified by date, number, name, and amount of one general certificate and processed to the County Treasurer. This certificate is to be signed by the President of the Board or, in his/her absence, the Vice-President or any Board member and countersigned by the Secretary to the Board as provided in RCW 28.A.330.080.

**BE IT FURTHER RESOLVED** that the signatures below are the true and correct signatures to appear on said warrants or certificate effective \_\_\_\_\_, 20\_\_\_\_\_.

The \_\_\_\_\_ County Treasurer is hereby authorized to pay all warrants authorized by such signatures.

**ADOPTED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. **EFFECTIVE:** \_\_\_\_\_

|                 |                |              |
|-----------------|----------------|--------------|
| _____           | _____          | _____        |
| Board President | Vice-President | Board Member |
| _____           | _____          |              |
| Board Member    | Board Member   |              |

**ATTEST:**

\_\_\_\_\_  
Superintendent, Secretary to the Board

**AUTHORIZATION TO INVEST FUNDS**

Board Resolution No. \_\_\_\_\_

**WHEREAS,** \_\_\_\_\_ School District No. \_\_\_\_\_ will have General, Capital Projects, Transportation Vehicle, Debt Service and Associated Student Body Funds during 20\_\_\_\_ - 20\_\_\_\_ which will not be required for immediate use of the District; and

**WHEREAS,** it is the intent of the District to utilize resources so as to maximize use of the taxpayers' dollars, now

**IT IS HEREBY RESOLVED** by the Board of Directors of \_\_\_\_\_ School District No. \_\_\_\_\_, \_\_\_\_\_ County, Washington, to authorize \_\_\_\_\_, the Superintendent, or his designee, Fiscal Officer, to continue to invest such funds as they become available effective \_\_\_\_\_.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, pursuant to RCW 28A.320.310.

\_\_\_\_\_  
Board President

\_\_\_\_\_  
Vice-President

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

**ATTEST:**

\_\_\_\_\_  
Superintendent, Secretary to the Board

**DESIGNATION OF DISTRICT AGENT**

Board Resolution No. \_\_\_\_\_

**BE IT RESOLVED** that the Board of Directors of \_\_\_\_\_ School District No. \_\_\_\_\_, \_\_\_\_\_ County, Washington, designates \_\_\_\_\_ as Superintendent of the \_\_\_\_\_ School District No. \_\_\_\_\_; and as Superintendent, \_\_\_\_\_ is hereby authorized to sign any and all Federal, State, County, and City applications and all necessary reports on behalf of the \_\_\_\_\_ School District No. \_\_\_\_\_.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

|                          |                         |                       |
|--------------------------|-------------------------|-----------------------|
| _____<br>Board President | _____<br>Vice-President | _____<br>Board Member |
| _____<br>Board Member    | _____<br>Board Member   |                       |

**ATTEST:**

\_\_\_\_\_  
Superintendent, Secretary to the Board

**DESIGNATION OF AUDITING OFFICERS**

Board Resolution No. \_\_\_\_\_

**WHEREAS**, the Board of Directors of \_\_\_\_\_ is required to appoint the Auditing Officers of the School District.

**IT IS HEREBY RESOLVED**, by the Board of Directors of \_\_\_\_\_ School District No. \_\_\_\_\_, \_\_\_\_\_ County, Washington, that \_\_\_\_\_, Superintendent, and \_\_\_\_\_, Fiscal Officer, be designated as Auditing Officers of the District to perform duties as authorized.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Board President

\_\_\_\_\_  
Vice-President

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

**ATTEST:**

\_\_\_\_\_  
Superintendent, Secretary to the Board

**CERTIFIED SIGNATURES OF DISTRICT PERSONNEL AUTHORIZED TO SIGN  
SCHOOL CONSTRUCTION PROJECT DOCUMENTS**

Board Resolution No. \_\_\_\_\_

**WHEREAS**, WAC 392-344-120 requires the District to provide the State Superintendent of Public Instruction with certified signatures of District personnel authorized to sign school construction project documents on behalf of the District;

**NOW, THEREFORE, BE IT RESOLVED** that the \_\_\_\_\_ School District No. \_\_\_\_\_ Board of Directors hereby authorizes the following person(s) to sign the District's school construction project requests for payment and other school construction documents with the following certified signatures.

\_\_\_\_\_, Superintendent and Board Secretary

**ADOPTED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**EFFECTIVE:** \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Board President

\_\_\_\_\_  
Vice-President

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

**ATTEST:**

\_\_\_\_\_  
Superintendent, Secretary to the Board

OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION  
Administrative Resource Services  
Old Capitol Building, PO BOX 47200  
OLYMPIA, WA 98504-7200  
(360) 725-6133 TTY (360) 664-3631 FAX (360) 753-4201

**CERTIFICATE OF APPOINTMENT OR ELECTION  
OF SCHOOL DISTRICT DIRECTOR**  
(Ref.: RCW 28A.343.370)

This is to Certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a majority of the (check one)  School District Board of Directors,  Educational Service District Board voted in a duly held public meeting to appoint/elect \_\_\_\_\_ to the office of director of \_\_\_\_\_ School District No. \_\_\_\_\_, to expire \_\_\_\_\_, and who replaces \_\_\_\_\_.

Certified by: \_\_\_\_\_  
(Secretary of the Board)

this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**DIRECTOR'S OATH OF OFFICE**  
(Ref.: RCW 28A.343.360)

TO: County Auditor

State of Washington )  
                                  ) SS.  
County of                )

I, \_\_\_\_\_, do hereby solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the state of Washington and will faithfully discharge the duties of Director of \_\_\_\_\_ School District No. \_\_\_\_\_, \_\_\_\_\_ County, state of Washington, to the best of my ability.

Signed: \_\_\_\_\_

Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signed: \_\_\_\_\_  
(Official administering oath)

Title of Official: \_\_\_\_\_

**CERTIFICATE OF DIRECTOR'S SIGNATURE**  
(Ref.: RCW 28A.400.020)

TO: County Auditor

This is to Certify that the signature which appears below is that of \_\_\_\_\_ who was appointed/elected to the office of Director of \_\_\_\_\_ School District No. \_\_\_\_\_.

Signed: \_\_\_\_\_  
(Director Elected)

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

Certified by: \_\_\_\_\_  
(Secretary of the Board)

Instructions on reverse side

this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

### CERTIFICATE OF APPOINTMENT OF SCHOOL DISTRICT DIRECTOR

This portion of the form is to be completed whenever a person is **appointed or elected** to the board of directors of a school district.

### DIRECTOR'S OATH OF OFFICE

This oath or affirmation must be taken before a school district or educational service district superintendent, notary public, or another official authorized to administer oaths prior to assuming the office of school director.

### CERTIFICATE OF DIRECTOR'S SIGNATURE

Every school district director and school district superintendent shall have his/her signature certified and on file in the office of the county auditor.

**DISTRIBUTION:      School Districts**

Submit the original and two copies of completed form to the Educational Service District Superintendent

**Educational Service District**

Send: Original – County Auditor

Copy – Legal Services  
Office of Superintendent of Public Instruction  
Old Capitol Building  
PO BOX 47200  
OLYMPIA WA 98504-7200

A reminder that all sections must be filled out in its entirety in order for Legal Services to update the information. The pertinent information is who the school board member replaced (if applicable) or if they were re-elected for another term. The new board member's address is needed as well.

**INSTRUCTIONS FOR COMPLETING CERTIFICATE OF ELECTION  
OR APPOINTMENT FORM**

**SCHOOL DISTRICTS:** Please complete and send the **original and two copies** to the Educational Service District Superintendent within 10 days after the annual change or any other change in the composition of the Board.

**EDUCATIONAL SERVICE DISTRICTS:** Please forward **one copy** to the Superintendent of Public Instruction, Attention: Administrative Resource Services.

**LIST ALL MEMBER(S) NAME, ADDRESS, AND WHO THEY REPLACED**

|                         |  |
|-------------------------|--|
| <b>NAME</b><br>CHAIRMAN | <b>HOME ADDRESS: (Street, PO Box, City, State)</b> |
| <b>REPLACES</b>         | <b>ZIP CODE</b>                                    |
| <b>NAME</b>             | <b>HOME ADDRESS: (Street, PO Box, City, State)</b> |
| <b>REPLACES</b>         | <b>ZIP CODE</b>                                    |
| <b>NAME</b>             | <b>HOME ADDRESS: (Street, PO Box, City, State)</b> |
| <b>REPLACES</b>         | <b>ZIP CODE</b>                                    |
| <b>NAME</b>             | <b>HOME ADDRESS: (Street, PO Box, City, State)</b> |
| <b>REPLACES</b>         | <b>ZIP CODE</b>                                    |
| <b>NAME</b>             | <b>HOME ADDRESS: (Street, PO Box, City, State)</b> |
| <b>REPLACES</b>         | <b>ZIP CODE</b>                                    |
| <b>NAME</b>             | <b>HOME ADDRESS: (Street, PO Box, City, State)</b> |
| <b>REPLACES</b>         | <b>ZIP CODE</b>                                    |

Form must be filled out completely and accurately. NOTICES  
SUBMITTED ON OTHER FORMS WILL NOT BE ACCEPTED.