Οrę	ganization Name: City of Orlando	Authorization #:
	Delegation	of Signing Authority Id Care Food Program
By means of this letter, I, Mayor Buddy Dyer (the Delegating Official, which is the Board Chairman, Executive Director, President or Majority Owner), delegate the authority herein described, to Lisa Early (my representative), on the following terms and conditions:		
1.	My representative may sign, on my behavioram (CCFP).	alf, any documents pertaining to the Child Care Food
2.	The designated effective time period of	this delegation is as follows:
	CCFP application checklist or	this delegation will be in effect from the date that the contract is signed, whichever date occurs earlier, or until revoked in writing by the delegating official,
	Annual Information Update a is signed, whichever date occ	is delegation will be in effect from the date that the CCFP nd Certification or contract amendment (when applicable) curs earlier, through September 30, 2015 or until revoked fficial, whichever date occurs earlier.
3.	The authority delegated is not subject to	sub-delegation without my prior and written consent.
4.	I understand that this delegation does not relieve me of responsibility to manage and supervise operation of the Child Care Food Program, that I may be liable for repayment of funds received and that I may be subject to disqualification from future participation in the Child Care Food Program should the terms of the contract with DOH for participation in the Child Care Food Program not be fulfilled.	
•	·	Signature (Delegating Official)
		Mayor Buddy Dyer
		Name
•		Title (Board Chairman, Executive Director, President or Majority Owner)
		Date
	Acknowledged and agreed:	Signature (Representative)
	÷	Lisa Early Name
		Families, Parks and Recreation Director