

TO: Elected Officials and Executive Directors

FROM: ERP ADMIN TEAM

SUBJECT: AUTHORIZED SIGNATURES

As you know, the Auditor's Office, administers security for the Enterprise ERP (Munis) system. To accomplish this, someone in your agency completes the Security Request Form, indicating the functions that should be available to the user and the level of access that should be granted (inquiry only or update capabilities).

Please copy the attached memo onto your agency letterhead and name the individual(s) within your agency, other than yourself, who have the authority to grant, modify and revoke ERP access for your agency's staff members. The completed form should be returned at your earliest convenience to our attention at the **AUDITOR'S**OFFICE – FISCAL SERVICES 373 S HIGH ST, 21st FL. or emailed to erpsupport@franklincountyohio.gov

Thank you.

Attachment on following page



то:	ERP ADMIN T Franklin Count	EAM y Auditor's Office		
FROM:				
	(Signature of e	lected official/executive	director)	
DATE:				
ENTER	PRISE ERF	(MUNIS) SEC	CURITY	
These individ	duals are hereby a	uthorized to sign Secur	ity Request Forms for this office i	n lieu of my signature
NAME (Prin	ited)	<u>TITLE</u>	WRITTEN SIGNATURE	

To revoke authorization, send a memo to Fiscal Department, Auditor – Fiscal Services, 21st floor or an e-mail to ErpSupport@franklincountyohio.gov. Please specify the name of the person whose authorization is being revoked.