

NAME (<i>Print or type</i>)	GRADE	DATE
OFFICIAL ADDRESS		
SIGNATURE		
TYPE OF DOCUMENT OR PURPOSE FOR WHICH AUTHORIZED	4716-3045-____-____	
IMPAC PURCHASE CARD BILLING STATEMENTS		
I CERTIFY THAT THE ABOVE IS THE SIGNATURE OF THE AUTHORIZED INDIVIDUAL		
NAME AND GRADE OF COMMANDING OFFICER (<i>Type or print</i>) OR HIS DESGINEE		
BURNS, COLLEEN, GS14		
SIGNATURE OF COMMANDING OFFICER OR HIS DESGINEE ATZC-DOC, Directorate of Contracting, 2021 Club Road, Fort Bliss, TX 79916-6812 (915) 568-5150		

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