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FLEXIBLE REWARDS
DESIGNEE AUTHORIZATION FORM

The individual named below shall have authority to approve Flexible Rewards in

_____ Department up to the amount designated below.

Approval Limit (Dollar Amount)	**Authorized Designee Name**	**Designee Signature**

Please email the original form to: connectboise@cityofboise.org
Subject Line: Flexible Rewards Designee

Approved by:

_____ _____
(Print or Type Name) (Title)

_____ _____
(Signature) (Date)