## Delegation of budget authority

This form does not need to be completed, if the member:

- Plans to sign his/her own budgets and approve employee hours
- Is under the age of 18 and a parent will sign all of the state and federal documents

## 

## Personal representative information

Member information

Name:		
Relationship to member:		
Address:		
City:	Zip code:	
Phone number(s): Home:	 Cell:	
Email address:		

By signing this agreement, the personal representative understands that he or she:

- Must be at least 18 years old
- Will not be paid to be the personal representative
- Cannot provide a direct service to the member

The personal representative will have authority to act on the member's behalf. He or she can:

- Sign budgets that allocate the monthly budget amount according to the Community Based Case Manager's service plan
- Approve payment for employee hours worked and vendor services provided
- Sign contracts on behalf of the member, including those needed for the persons or entities that will be providing services and supports to the member
- Determine the amount to be paid for services (except for the Financial Management Service) - please note: the Independent Support Broker cannot be paid more than the maximum allowed by Iowa Administrative Code 441-79.1(2)
- Schedule the services to be provided to the member



A copy of this form must be submitted to Veridian Fisc rest of the Member Packet, if a personal representative	
This agreement is effective the date that it is signed by until either the member or the personal representative be terminated.	•
Member's signature	Date
Personal representative's signature	Date

