APPROVAL OF DELEGATE

This form must be used by any responsible party who wishes to assign their signing authority as per Physio-Control Finance Policy 900.200.PCII A copy of this approval form must be provided to Physio-Control Finance Manager of Internal Controls before such delegation will be deemed effective.

Please Select from the drop down menus: Spend Category Delegated Amount per year (USD) **If the amount turns red, it is over the polic	General & Operational Matters \$100,000 y thresehold. Please revise.
Delegate Name:	Marcie Stoetzel
Delegate Title:	Service Contract Supervisor
Signature: Date:	Delegation of: Device Service Plans and Subscription Services
By signing below, you are acknowle \$100,000 USD on your behalf.	edging that the assigned delegate named above can approve General & Operational Matters up to
Delgator's Name:	Brian Mendonca
Delgator's Title:	Senior Director Financing
Signature: Date:	Polenela Corporate Seal 1966 11 3/2017 Illumination Ministration Min
**Please return to Kayla VanderKlok, Finan	