APPOINTMENT OF HRM AGENCY POINTS OF CONTACT

MEMORANDUM

TO: ALHRM@personnel.alabama.gov

FROM:

State Agency

I hereby appoint the HRM agency representatives indicated below as the points of contact for the HRM project. I authorize the HRM Agency Points of Contact to coordinate with the Project Team and to collect and communicate the necessary payroll and/or personnel data for successful implementation and completion of the HRM project.

| Agency Point of Contact - Personnel (Please Print) | Title |
|--|-------|
| Agency Point of Contact - Payroll (Please Print) | Title |
| Department Head Approval | Date |

In my capacity as Agency Point of Contact, I understand that I have the responsibility to maintain the security and confidentiality of payroll/personnel related information which I collect and disseminate to the project team. I fully understand and enter into this agreement with the knowledge that a violation of security and confidentiality are a criminal offense subject to prosecution.

| Signature Department Agency Point of Contact - Personnel | Email | Phone |
|--|-------|-------|
| Signature Department Agency Point of Contact - Payroll | Email | Phone |