



DEPARTMENT OF THE ARMY  
US ARMY INSTALLATION MANAGEMENT COMMAND  
HEADQUARTERS, UNITED STATES ARMY GARRISON REDSTONE ARSENAL  
4488 MARTIN ROAD  
REDSTONE ARSENAL, ALABAMA 35898-5000

REPLY TO  
ATTENTION OF

IMRE-ZA

22 JAN 2019

MEMORANDUM FOR Ms. Kristina Stage, Garrison Resource Management Officer,  
USAG-Redstone Arsenal, 4488 Martin Road, Redstone Arsenal, AL 35898

SUBJECT: Delegation of Authority for Administrative Control of Funds

1. References:

- a. DFAS-IN Regulation 37-1, Chapter 3, Program and Budget Authority and Chapter 4, Administrative Control of appropriations and Financing Requirements
- b. DoD Financial Management Regulation 7000. 14-R, Volume 14, Administrative Control of Funds and Antideficiency Act Violations

2. Effective 22 January 2019, you are hereby delegated administrative control of funds for all funds received from Installation Management Command (IMCOM HQ) for Garrison Redstone Arsenal (A2ABK/B4AL). Funds will be formal subdivisions subject to the provisions of the Anti-Deficiency Act (ADA) and issued to the position of Garrison commander/Manager on Fund Authorization Documents (FADs)

3. You are responsible for adhering to all statutory and regulatory financial policies and procedures governing funds control. The obligations you incur must conform to 31 USC 1341(a), 31 USC 1501, 31 USC 1108, 31 USC 1517, and 31 USC 1514, and to other applicable provisions of law.

4. You will complete the letter of acceptance using the enclosed template (Encl 1) and return to HQ IMCOM G8, Director Financial Operations.

5. You will complete the DoD FM Certification courses at their corresponding certification level for Fiscal Law, Audit Readiness and Ethics. Failure to comply with this requirement within six months of receipt will lead to revocation of the delegated authority.

  
KELSEY A. SMITH  
COL, AV  
Commanding

**APPOINTMENT/TERMINATION RECORD - AUTHORIZED SIGNATURE**

*(Read Privacy Act Statement and Instructions before completing form.)*

**PRIVACY ACT STATEMENT**

**AUTHORITY:** E.O. 9397, 31 U.S.C. Sections 3325, 3528, DoDFMR, 7000.14-R, Vol. 5.  
**PRINCIPAL PURPOSE(S):** To maintain a record of appointment and termination of appointment of persons to any of the positions listed in Item 6, and to identify the duties associated with this appointment.  
**SORN T1300** (<http://dpcid.defense.gov/Privacy/SORNS/Index/DOD-wide-SORN-Article-View/Article/570154/1300/>)  
**ROUTINE USE(S):** The information on this form may be disclosed as generally permitted under 5 U.S.C Section 552a(b) of the Privacy Act of 1974, as amended. It may also be disclosed outside of the Department of Defense (DoD) to the Federal Reserve Banks to verify authority of the appointed individuals to issue Treasury checks. In addition, other Federal, State and local government agencies, which have identified a need to know, may obtain this information for the purpose(s) identified in the DoD Blanket Routine Uses published at: <http://dpcio.defense.gov/Privacy/SORNS/Index/BlanketRoutineUses.aspx>.  
**DISCLOSURE** Voluntary; however, failure to provide the requested information may preclude appointments.

**SECTION I - APPOINTEE**

<b>1. NAME</b> <i>(First, Middle Initial, Last and Rank or Grade)</i> KRISTINA N STAGE, GS-14		<b>2. DoD ID NUMBER</b> 1098987297	<b>3. TITLE</b> DIRECTOR RESOURCE MANAGEMENT
<b>4. DOD COMPONENT/ORGANIZATION</b> IMRE-RM USAG-REDSTONE ARSENAL		<b>5. ADDRESS</b> <i>(Include ZIP Code, email address, and telephone number with area code and DSN)</i> 4488 MARTIN ROAD REDSTONE ARSENAL, AL 35898 256-842-2332	
<b>6. POSITION TO WHICH APPOINTED</b> <i>(X appropriate box - one only. Checking more than one invalidates the appointment.)</i>			
<input type="checkbox"/> DISBURSING OFFICER: DSSN	<input type="checkbox"/> CASHIER	<input type="checkbox"/> CHANGE FUND CUSTODIAN	
<input type="checkbox"/> DEPUTY DISBURSING OFFICER: DSSN	<input type="checkbox"/> PAYING AGENT	<input type="checkbox"/> IMPREST FUND CASHIER	
<input checked="" type="checkbox"/> CERTIFYING OFFICER	<input type="checkbox"/> COLLECTIONS AGENT	<input type="checkbox"/> SAFEKEEPING CUSTODIAN	
<input type="checkbox"/> DEPARTMENTAL ACCOUNTABLE OFFICIAL	<input type="checkbox"/> DISBURSING AGENT	<input type="checkbox"/> ASSISTANT SAFEKEEPING CUSTODIAN	

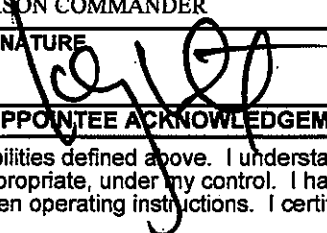
**7. YOU ARE APPOINTED TO SERVE IN THE POSITION IDENTIFIED IN ITEM 6. YOUR RESPONSIBILITIES INCLUDE:**

Ms. Kristina N. Stage is hereby delegated the administrative control of funds for all funds received and controlled by B4AL/A2ABK. Funds will be formal subdivisions subject to the provisions of the Antideficiency Act (ADA) and issued to the position of Garrison Commander/Manager on Fund Authorization Documents (FADs) or received from customers under reimbursable agreements and orders.

Ms. Stage is responsible for adhering to all statutory and regulatory financial policies and procedures governing funds control. The obligations you incur must conform to 31 USC 1341(a), 31 USC 1501, 31 USC 1108, 31 USC 1517, and 31 USC 1514, and to other applicable provisions of law. You will complete the DoD FM Certification courses at their corresponding certification level for Fiscal Law, Audit Readiness and Ethics.

**8. REVIEW AND ADHERE TO THE FOLLOWING PUBLICATION(S) NEEDED TO ADEQUATELY PERFORM YOUR ASSIGNED DUTIES:**  
 DOD FMR 7000.14R  
 DFAS-IN Regulation 37-1

**SECTION II - APPOINTING AUTHORITY**

<b>9. NAME</b> <i>(First, Middle Initial, Last)</i> KELSEY A SMITH	<b>10. TITLE</b> GARRISON COMMANDER	<b>11. DOD COMPONENT/ORGANIZATION</b> IMRE-ZA USAG-REDSTONE ARSENAL
<b>12. DATE</b> <i>(YYYYMMDD)</i>	<b>13. SIGNATURE</b> 	

**SECTION III - APPOINTEE ACKNOWLEDGEMENT**

I acknowledge and accept the position and responsibilities defined above. I understand that I am strictly liable to the United States for all public funds or payment certification, as appropriate, under my control. I have been counseled on my pecuniary liability applicable to this appointment and have been given written operating instructions. I certify that my official signature is shown in item 16 below.

<b>14. PRINTED NAME</b> <i>(First, Middle Initial, Last)</i>	<b>15. DATE</b> <i>(YYYYMMDD)</i> <i>(Not earlier than date in Item 12 or 13)</i>
<b>16.a. DIGITAL SIGNATURE</b>	<b>16.b. MANUAL SIGNATURE</b>

**SECTION IV - APPOINTMENT TERMINATION**

The appointment of the individual named above is hereby revoked.	<b>17. DATE</b> <i>(YYYYMMDD)</i>	<b>18. APPOINTEE INITIALS</b>
<b>19. NAME OF APPOINTING AUTHORITY</b>	<b>20. TITLE</b>	<b>21. APPOINTING AUTHORITY SIGNATURE</b>



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REPLY TO  
ATTENTION OF

IMRE-RM

22 JAN 2019

MEMORANDUM THRU COL Kelsey Smith, Garrison Commander, USAG-Redstone Arsenal, 4488 Martin Road, Redstone Arsenal, AL 35898

FOR US Army Installation Management command (IMCOM), Director of Resource Management, G-8 Financial Operations

SUBJECT: Acceptance of Delegation of Authority for Administrative Control of Funds

1. References:

a. DFAS-IN Regulation 37-1, Chapter 3, Program and Budget Authority and Chapter 4, Administrative Control of appropriations and Financing Requirements

b. DoD Financial Management Regulation 7000. 14-R, Volume 14, Administrative Control of Funds and Antideficiency Act Violations

2. Effective 22 January 2019, I accept this delegation of authority for administrative control of funds and acknowledge funds will be distributed on Fund Authorization Documents (FADs) as formal subdivisions subject to the Antideficiency Act. Any redelegation will be in writing, by name and organization and include signature card (DD Form 577).

KRISTINA N. STAGE  
Resource Management Officer