

AUTHORIZATION

_____ Date

Sir/Madam:

Please be informed that Mr./Ms. _____,
_____, _____,
(Position) (Address)

is the only authorized representative to deal, transact, negotiate, and make necessary corrections or to do and perform all acts relative to the application for registration of _____.
(Name of Association) Furthermore,

only the above-named person is allowed to make follow-up and request for the release of any and all the registration documents, including the Certificate of Registration of the Articles of Incorporation, By-Laws or its amendments.

Specimen Signature of:

Authorized Representative

Association President

SUBSCRIBED AND SWORN to before me this ____ day of _____, 20____, affiant exhibiting to me his/her Community Tax Certificate No. _____ issued on _____ at _____.

NOTARY PUBLIC

Doc. No. : _____
Page No. : _____
Book No. : _____
Series of : _____