



Policy/Contract Number(s) _____

I _____,
(Name) (Title)

of _____
(Name of Entity)

a _____, (the "Entity")
(Enter State of Domicile) (Type of Entity)

having Taxpayer Identification Number _____

do hereby certify that the following individual is a duly elected and presently acting officer of the Entity, holding the position indicated below and that the signature appearing after his/her name was duly affixed by him/her and that he/she is the sole officer/member authorized to act on behalf of the Entity:

(Name - Please print)

(Title)

(Signature)

IN WITNESS WHEREOF, I have hereto set my hand and affixed the seal of the Entity

this _____ day of _____, _____.

(Name)

(Title)

AFFIX CORPORATE SEAL HERE

Complete ONLY if form is being modified after the original sign date.

I CERTIFY that this form was modified by me, the Owner on ____/ ____/ ____/. Sign below (If Non-Individual, include the capacity in which you are signing). Signature: _____