

CERTIFICATE OF AUTHORITY

(required in all Commercial Claim
and Consumer Transaction Cases)

I, _____, am an _____
(Your Name) (officer, director or employee)

of _____
(Name of Corporation, Partnership or Association)

and have been authorized to represent the aforesaid corporation, partnership or
association in a Commercial Claim/Consumer Transaction against:

(Name of Defendant)

I certify that I have the requisite authority to bind the corporation, partnership or
association in a settlement or trial of any claim or counterclaim.

Dated: _____
Signature

Sworn to before me this _____
day of _____, 20__

Notary Public or Clerk of the Court