



AUTHORIZATION OF REPRESENTATIVE

| | |
|----------------|---|
| Mag. Dist. No: | MDJ-51-3-03 |
| MDJ Name: | Honorable Tony J. Little |
| Address: | 40 Church Road East Berlin, PA 17316 |
| Telephone: | 717-337-5770 |

v.

Docket No:
Case Filed:

PURSUANT TO PA. R.C.P.M.D.J. NO. 207(B):

Individual:

I designate _____ to act as the authorized representative in the above-captioned matter.

Date: _____ Name (Print): _____
Signature: _____

Partnership, Corporation or Similar Entity:

I designate _____ to act as the authorized representative of _____ in the above-captioned matter.

I further certify that I have the authority to execute this form on behalf of the party and that I am: **(check one)**

- the individual or sole proprietor that is the party;
- an officer of the corporation that is the party;
- a partner of the general partnership that is the party;
- a general partner of the limited partnership that is the party;
- a manager of the limited liability company that is the party;
- an officer of the board of governors of the professional association that is the party;
- a trustee of the business trust that is the party;
- of the public body and body corporate and politic.

Date: _____ Name (Print): _____
Signature: _____

Authorized Representative Contact Information:

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

I, _____, do hereby verify, to the best of my knowledge, information and belief, that I have personal knowledge of the facts and circumstances of the above-captioned matter.

Name of Authorized Representative (Print): _____
Signature: _____

