AUTHORIZED REPRESENTATIVES

Ivai	ne of Organization		E-mail address
Ma	iling Address (P.O. Bo	ox #, Street, City & State)	Zip Code
Stre	eet Address/Location (I	If different from mailing address)	
Cor	unty	Telephone :	# Fax #
TH	E FOLLOWING R	REPRESENTATIVES ARE DE	ESIGNATED TO:
A.	Represent Done	e Organization as its authorized a	gent; and
В.	Acquire Federal	surplus property on behalf of the	Donee Organization; and
C.	Obligate necessa	ary Donee Organization funds for	this purpose; and
D.		ntion Documents binding the Don d restrictions applying to Propert	ee Organization to the terms, condition yobtained through the agency.
(De	NEW DESIGNATIONS ADDITIONAL DESIGNATIONS ONLY [Add to previous authorizations]		
RE	PRESENTATIVES	:	
	Name	Title	Signature
		_	·
CE			