

Designee Authorization or Replacement Form

Principal Representative: Fill in the information below, sign and Fax to 202-526-6646, or Deliver to DCTV, 901 Newton Street, NE, Washington, DC 20017

Principal Representative, please use this form to:

- Authorize registration of up to four Designees to work on behalf of your Organization (*list below and sign to authorize*).
- Authorize the addition, replacement or deactivation of Designees as needed during the year (*indicate new list below and sign*).

Organization Name: _____ **Date:** _____

Principal Representative's Name: _____

Name (please print legibly):	Replaces Designee (Name) if applicable:	Date Active:	Date Deactivated:	Authorizing Signature
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Principal Representative's Signature

Number of Designees Listed on this Form
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