

# Authorizing Individual Affidavit

State of Vermont

\_\_\_\_\_ County, SS.

I, \_\_\_\_\_, being duly sworn, deposes and says:  
(Name)

1. I am the \_\_\_\_\_ of the \_\_\_\_\_  
(Title) (Company Name)
2. I am at least 18 years of age.
3. I have a personal history of honesty, trustworthiness and fairness and a reputation for fair dealings and respect for the rights of others and for the law.
4. I have the authority to direct the management or policies of the above company or
5. I have the authority to enter into contractual relationships with client companies on the above company's behalf.
6. I have not been convicted of a felony or any misdemeanor involving moral turpitude.
7. I have not had an employee leasing company license revoked in this or any other state.

\_\_\_\_\_  
Name (Signature)

Sworn to me this \_\_\_\_ day of \_\_\_\_\_ .

Notary Public \_\_\_\_\_

Commission Expires: \_\_\_\_\_