

Authorized Signature

Name: _____
Title/Designation: _____
Date: ____/____/____
Official Stamp

Place
Company/Organization
Stamp Here

Important Notes:

- This document is not valid unless signed and stamped by the authorized person/official.
- The signature must match the specimen signature on record.
- The official stamp must be clear and unaltered.
- Unauthorized alteration or reproduction of this document is strictly prohibited.