WRITTEN AUTHORIZATION

To represent employing unit in its relations with the Texas Workforce Commission

GRANTOR INFORMATION	
1. CONTACT NAME: 2. PHONE NO	3. TWC ACCT NO 4. FEID NO
*(5) BY THIS INSTRUMENT,	
(Name of Grantor)
(6) an employing unit which is a/an	
(Individual, Partnership, or Corporation, etc.)
(7) whose address is	
(Grantor's current mailing address)
*(8) appoints_	
	Name of Authorized Grantee)
(9) whose TWC ACCOUNT NO. is	
and whose address is	
its lawful representative to represent it in its relations with the Texas Workforce Commission, and specifically authorizes said representative to transact any and all business as between grantor of said authorization and said Commission to do any and all acts necessary, excluding litigation in court.	
This Written Authorization shall be in full force and effect until such time as a Revocation of Written Authorization, Form C-43, revoking it is filed in the office of said Commission at Austin, Texas. (<u>Revocable by either party, the Grantor or Grantee</u> .)	
*(10) Printed some singeture and title (Ourses D	andreas Officer ata) of memory similar for Creater
Printed name, signature and title (Owner, P	artner, Officer, etc.) of person signing for Grantor.
*(11) Date Signed	
*MANDATORY INFORMATION	