## ALASKA SEAFOOD PROCESSORS PANDEMIC RESPONSE RELIEF PROGRAM SIGNATORY AUTHORITY FORM

Department of Commerce, Community, and Economic Development

Use this section to designate individuals <u>other than the owner or authorized officer</u> to apply for and sign for, and submit financial/progress reports for, the Alaska Seafood Processors Pandemic Response Relief Program. Please clearly print and submit as an upload via the Alaska Seafood Processors Response Relief Program application portal. The information provided on this form should match the filer details on the official grant application and must be authorized by the owner or officer of the business.

Date:

**Telephone Number:** 

**Business Name:** 

**Business Contact Name:** 

Address:			E-mail Address:				
City, State, Zip Code:			DUNS #:				
Grant Application and Agreement:				Financial/Progress Reports:			
Printed Name:		Printed Name:					
Title:		Title:					
Signature:		Signature:					
This signatory authority is conveyed by			, the				
		(Name)					
Owner/Officer of			, this	day of		, 20	
(Business Name)							
	Si	gnature					
	Printed Name/Title						