FORM C-1

Governmental Entity - Authorized Officials

Legal Business Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Include the full names (last, first, middle) and addresses for the officials who are authorized to enter into a contract on behalf of the Applicant.

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| **Name:** |  | |  | **Mailing Address (incl. street, city, county, state, & zip):** | |
| **Title:** |  | |  |  |  |
| **Phone:** |  |  |  |  |  |
| **Fax:** |  | |  |  |  |
| **E-mail:** |  | |  |  |  |
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| **Fax:** |  | |  |  |  |
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