



SPECIMEN SIGNATURE CARD

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Form No.	OGLD-1049
Revision No.	1
Effectivity	August 28, 2019

Date:

Name of POGO / SP / LA:

Business Address:

APPLICANT'S AUTHORIZED SIGNATORIES

Name	Position/Title	Please honor and recognize the following signatures:
		1.
		2.
		1.
		2.
		1.
		2.
		1.
		2.
		1.
		2.

CERTIFICATION

This is to certify that the person/s whose signature/s appears above is/are our authorized signatories designated to sign documents for submission to the Offshore Gaming Licensing Department (OGLD). We also understand that if the documents submitted are signed by any other person not included in this list, the same shall not be processed and subsequently returned by OGLD.

Approved by:
(To be filled up by the Applicant's Corporate Secretary)

NAME <i>(Please Sign over Printed Name)</i>	DATE
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