

## IBBA AUTHORIZATION FORM

\_\_\_\_\_  
(Individual or Ranch Name)

\_\_\_\_\_  
(IBBA Member#)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

Beginning on the date of \_\_\_\_\_, the above named IBBA membership hereby authorizes the person (or persons; limit of two) named below to execute documents on behalf of the above named IBBA membership.

I, undersigned, understand that the IBBA can refuse to process work that does not bear the signature of a properly authorized agent. This authorization shall remain in effect until written notice of cancellation is received by the IBBA.

If the IBBA membership referenced by this document is held by a syndication, only one person may be authorized to execute documents on behalf of the syndication.

**Printed Name of Authorized Person(s)**

**Signature of Authorized Person(s)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In executing this authorization form, I represent that I have such ownership or have the authority to act on behalf of the above named organization.

\_\_\_\_\_  
(Name of ranch, partnership, corporation, or syndicate)

By: \_\_\_\_\_

(Authorized signature)

Title: \_\_\_\_\_

(Owner, officer, partner, syndicate manager)