

**FISHER INVESTMENTS**  
**PRIMARY CAREGIVER CERTIFICATION**

Please choose one and complete the required information.

I, \_\_\_\_\_ certify that  
(Employee Name, print legibly)

☐ I am the primary caregiver for a child born or adopted on \_\_\_\_\_ (Date)

and will serve as the primary caregiver from \_\_\_\_\_ (Dates).

☐ I am not the primary caregiver for my child born or adopted on \_\_\_\_\_ (Dates).

By signing below, I certify that I have read the Parental Leave Policy and understand the eligibility definitions and attest that the above information is true and correct.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)