

CLAIM-SPECIFIC AUTHORIZATION FOR CLAIMANT'S DESIGNATED REPRESENTATIVE (CDR)

Georgia Department of Revenue - Unclaimed Property Program

Date: _____

1. Parties

Claimant (Business Entity):

Legal Name: _____

State of Formation: _____ FEIN: _____

State Control/Charter/Registration No. (if known): _____

Business Address: _____

City/State/ZIP: _____, _____

Authorized Representative (CDR):

Load Router, LLC

Georgia DOR CDR Identification No.: _____

CDR Address: _____

City/State/ZIP: _____, _____

Email: _____ Phone: _____

2. Purpose and Background

Claimant desires to appoint the Authorized Representative, as Claimant's Designated Representative (CDR), to assist with preparation and submission of an unclaimed property claim to the Georgia Department of Revenue (the "Department").

This authorization is intended to be used together with, and is limited by, the Department's required "UP-CDR2 Recovery Agreement" (currently Rev. 04/09/2025) executed by Claimant and the Authorized Representative.

3. Claim Definition and Limitation (Single Claim Only)

This authorization applies only to the specific unclaimed property claim covering the Property ID(s) listed in the executed UP-CDR2 Recovery Agreement between Claimant and Authorized Representative dated _____ (the "Claim"). Authorized Representative has no authority with respect to any other property, claimant, or matter unless and until Claimant executes a separate written authorization and a separate UP-CDR2 Recovery Agreement (as applicable).

4. Appointment

Claimant hereby appoints Authorized Representative as Claimant's Designated Representative (CDR) for the Claim. Claimant authorizes the Authorized Representative to act on Claimant's behalf solely as provided in this letter, subject to the limitations in Sections 3, 5, and 6.

5. Scope of Authority (Claim-Specific)

Solely in connection with the Claim, Authorized Representative may:

- Prepare and submit claim forms and supporting documentation to the Department;
- Communicate with the Department regarding the Claim, including responding to requests for additional information or documentation;
- Receive correspondence, status updates, and determinations regarding the Claim; and
- Coordinate with Claimant to collect and organize documents reasonably required by the Department for the Claim.

6. No Funds Handling; No Assignment; Not a Power of Attorney

Claimant's unclaimed property proceeds shall be remitted directly to Claimant by the Department. An authorized representative is not authorized to receive, possess, deposit, negotiate, endorse, or forward any check or warrant payable to Claimant, nor to change the Claimant's payee information, remittance address, or banking information with the Department.

This letter does not transfer, assign, sell, or convey any ownership interest in Claimant's unclaimed property. This letter is not a power of attorney and does not authorize Authorized Representative to: (i) settle unrelated disputes, (ii) open or control any bank or payment account, (iii) sign tax returns, corporate filings, or other non-claim documents, or (iv) act for Claimant in any matter other than the Claim.

If the Department approves a separate fee payable to the Authorized Representative under UP-CDR2, the Department may remit that fee directly to the Authorized Representative as specified in UP-CDR2. An authorized Representative will not request or accept any payment from the Department that is payable to Claimant.

7. Term and Revocation

This authorization is effective as of the Date above and continues until the earliest of: (a) completion of the Claim and issuance of the Department's final disposition, (b) written revocation by Claimant as permitted by law, or (c) written withdrawal by Authorized Representative.

Claimants may revoke this authorization as permitted by applicable law and the executed UP-CDR2 Recovery Agreement. Upon receipt of written notice of revocation, the Authorized Representative will cease acting on the Claim and will notify the Georgia Department of Revenue Unclaimed Property Program as required.

8. Claimant Cooperation and Signer Authority

Claimant agrees to provide accurate information and reasonably requested documentation needed for the Claim in a timely manner. Claimant represents that the individual signing below is authorized to bind Claimant and to appoint a CDR for the Claim. If requested by the Department, Claimant will provide documentation confirming the signer's authority (e.g., corporate resolution, officer certification, or other evidence).

9. Priority of UP-CDR2; Governing Law

In the event of any conflict between this letter and the executed UP-CDR2 Recovery Agreement for the Claim, the UP-CDR2 Recovery Agreement shall control. This letter shall be governed by the laws of the State of Georgia, without regard to conflict-of-laws principles.

10. Notices

Notices under this letter must be in writing and delivered by email and/or certified mail to the contact information listed in Section 1 (or as later updated in writing by the applicable party).

Attachments

Executed UP-CDR2 Recovery Agreement (Rev. 04/09/2025) for the Claim, including the listed Property ID(s) and any exhibits/addenda.

Acknowledged and Agreed:

CLAIMANT (Business Entity)

By: _____

Name: _____

Title: _____

Entity: _____

Date: _____

AUTHORIZED REPRESENTATIVE (CDR) (Acknowledgement)

Load Router, LLC

By: _____

Name: _____

Title: _____

Date: _____