AUTHORIZED SIGNATORY LETTER TO Care4SignCAFOReSign/DSC

(To be submitted to CA by Authorized Signatory)

То

Care4Sign Safetec Limited 1stFloor, OfficeNo.1,No.44-45-46, CNR Complex, Vinayaka Layout, Ananthapura Gate, Yelahanka NewTown, Bengaluru Karnataka, 560064

I, Controlling / Administrative Authority / Head of Office / Head of Department (HoD)
FULL NAME:
Organization Name: GOVERNMENT OF KERALA
Position/Designation:
Postal Code:
Organization Identity Card Number:
Office Name & Address:
Office Tel No:
Mobile No:
Email id:
Website Reference of my information ,If any:(Optional)
Certificate type: Sign Sign & encryption
iignature:
Seal & Stamp)
Date:
Enclosed: ID card of Authorized signatory / identity letter issued by the organization / Proof of

individuals association with organization