

**YOUR CORPORATE NAME  
ADDRESS/COMPANY LETTERHEAD**

## **CORPORATE AUTHORITY AFFIDAVIT**

As board member(s)/officer(s) of

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**True and correct name of corporation – Must be listed the same on the Notice of Small Claim**

a corporation, I/we hereby authorize(s) the following people to represent the corporation in all matters pertaining to the small claim section of Pierce County District Court, including, but not limited to: filing the Small Claim, mediation hearings, trials and any collection of said small claim.

List of individuals to represent corporation

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Printed name and title in corporation

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Printed name and title in corporation

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Printed name and title in corporation

Date \_\_\_\_\_

Authorized by:

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Signature  
Printed Name  
Title in Corporation

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Signature  
Printed Name  
Title in Corporation

STATE OF WASHINGTON )

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County of \_\_\_\_\_ )

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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NOTARY PUBLIC in and for the State of Washington,  
commission expires \_\_\_\_\_