

Official Use Only

United Nations Compensation Commission

E *Signature and Affirmation for Claims of Corporations and
Other Entities*

I hereby affirm that I am duly authorized by the claimant corporation or
entity to submit this claim, and that the information provided on these
claim forms is correct.

Name: _____

Function: _____

Address: _____

Date: _____

Signature: _____

(Attach documentation demonstrating the authorization of the claimant
corporation or entity).

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