

## Officer and Authorized Representative Designation Form

As stated in Section 11.3.1 of the PJM Operating Agreement all PJM Members are required to complete and maintain accurate records including maintenance of correct and updated Member and Affiliate information, appropriate personnel contacts, PJM committee representatives, organizational structure, and other information as reasonably requested by the Office of the Interconnection to ensure the accuracy and completeness of Member records. This information must be supplied by an officer or authorized representative as designated on the Form of Secretary Certificate. Contact information for those individuals listed on the Form of Secretary Certificate should be supplied on this Officer and Authorized Representative Designation form.

## Officer Designation (\*designate 2 officers at minimum):

	Officer 1	Officer 2	Officer 3
Action:			
First Name:			
Last Name:			
Title:			
Phone: (cell, office,			
other)			
Email:			
Existing My PJM.com			
username: (if			
applicable)			
	Authorized Representative 1	Authorized representa  Authorized Representative 2	Authorized Representative 3
Action:	Add/Remove	Add/Remove	Add/Remove
First Name:			
Last Name:			
Title:			
Phone: (cell, office,			
other)			
Email:			
Existing My PJM.com username: (if applicable)			
By completing this form, I_ are the officer(s) and autho	prized representative(s) for	` ,	edge that the above-named individu
` ,	. ,		"PJM") that such individual(s) are no
			rized representative(s) will provide
PJM with Member information		` '	nzed representative(s) will provide
		•	
		(Name)	
		(Signature)	
		(Title)	

Please email this completed form to membershipforms@pjm.com. The representatives named will be contacted with Membership Management Community login instructions.

(Date)