



Federated International, Inc.

Instructions for completion of a U.S. Customs Power of Attorney

*******Corporation*******

1. Check appropriate box.
2. Federal I.D. number (I.R.S. #) or U.S. Customs assigned number.
3. Full corporation name.
4. Complete name of **State** or **Province** of incorporation.
5. Not applicable
6. If operating under a name other than in #3 above, show the second name here.
7. Not applicable
8. Complete corporate address including state or province and postal code.
9. If conducting business with Federated International, Inc. via a third party to whom you wish billing and customs records to be sent, enter the third party's full name and address. If conducting business directly with Federated International, Inc., leave blank.
10. Complete corporate name as in #3.
11. Typed name and Signature of a first Corporate officer *.
12. Title of the above corporate officer*.
13. Date signed.
14. (Optional) Typed name and Signature of a witness to the officer's signature.

*****Certification For Non Resident (e.g. Canadian) Corporation Portion*****

15. Name of a Second corporate officer* other than the one that signed the face of the Power of Attorney.
16. Second corporate officer's* title.
17. Corporate name from line #3 of the Power of Attorney.
18. Complete name of Province of incorporation
19. Name of the First corporate officer* who signed the Power of Attorney.
20. Title of the First corporate officer* who signed the Power of Attorney.
21. City where Power of Attorney is being signed.
22. Date signed.
23. Signature of the Second corporate officer*.

*******Only One Officer of the Corporation*******

24. Name of officer who signed Power of Attorney.
25. Name of corporation.
26. Date signed.
27. Signature of person shown on line #23.

* U.S. Customs only accepts the following titles as having signing authority for any corporation:
President, Vice-President, Secretary, or Treasurer

*******Partnerships, Individuals or Sole Proprietorships*******

1. Check appropriate box.
2. Federal I.D. number (I.R.S. #) or U.S. Customs assigned number.
3. Full individual name or if a partnership, the full name of all partners (Addendum may be used). If a limited partnership, show the firm name and all of the general partners (Addendum may be used).
4. Not applicable
5. Show "Individual," "Partnership," " Limited Partnership," or "Limited Liability Corporation" (if a Limited Partnership, U.S. Customs regulations require that a copy of the partnership agreement accompany the Power of Attorney).
6. If operating under a name other than in #3 above, show the second name here.
7. Residential address of the person signing on line #10.
8. Complete business address including state or province and zip/postal code.
9. If conducting business Federated International, Inc. via a third party to whom you wish billing and Customs records to be sent, enter the third party's full name and address. If conducting business directly with Federated International, Inc., leave blank.
10. Complete name as in #3.
11. Typed name and Signature of individual or one partner.
12. Legal capacity of signer (e.g., "Individual," "General Partner", etc.).
13. Date signed.
14. (Optional) Typed name and Signature of a witness to the above signature.

Note: a Notary Public should notarize all Powers of Attorney other than corporations.

Please send completed original (faxed copies are not acceptable) to the address below and maintain a copy for your files.