



WEST VIRGINIA SECRETARY OF STATE
ELECTRONIC FILING OF RULES AUTHORIZATION FORM

Date Submitted _____ Date Approved _____

Agency, Board or Commission Name _____

Address _____ Phone _____

The purpose of this form is to establish authorized access to the Electronic Rule Filing System and to have signatures on-file, as required by statute, for handling the filing of Rules with the Secretary of State's office.

There are four levels of access to the ERFS: 1) Review, Edit, Print; 2) Fiscal; 3) Submission; 4) All.

- 1) The following individual within my entity is granted permission to access, review, retrieve, edit and print our existing Rules.
- 2) The following individual within my entity is granted permission to add fiscal forms to our existing Rules.
- 3) The following individual within my entity is granted permission to file (submit) rules electronically. §5F-2-2(12) and (13) cites that by affixing my signature to this form, I am granting written consent to the individual listed below, the authority to electronically file Rules on my behalf.
- 4) All of the above

Printed Name	E-mail Address of Individual	Level of Access
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Title Numbers _____ Series Numbers _____

Any changes in staffing will require a new form to be completed prior to permissions being granted.

Agency Authorized Signature

Title

State of County of

Signed or attested before me on{date} by {name(s) of
individual(s) making statement}

..... {Signature of Notary Public}

My commission expires:

Place Notary Stamp Here