



# Office of Compliance

## NOTICE OF DESIGNATION OF REPRESENTATIVE

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION

EMPLOYEE NAME: _____
EMPLOYING OFFICE: _____
CASE NUMBER: _____

The Procedural Rules of the Office of Compliance provide that a party wishing to be represented by another individual, firm, or other entity must file with the Office of Compliance a written Notice of Designation of Representative. No more than one representative, firm, or other entity may be designated as representative for a party, unless approved in writing by the Hearing Officer or Executive Director. The representative may be, but is not required to be, an attorney. If the representative is an attorney, he or she may sign the designation of representative on behalf of the party.

**The listed individual shall remain on file as the designated representative unless or until the represented party or the representative, with notice to the party notifies the Executive Director of the Office of Compliance *in writing* that this Designation is modified or revoked.** All service of documents shall be directed to the designated representative unless or until such time as the represented party or representative, with notice to the party, specifies otherwise and notifies the Executive Director of amendment modification or revocation of the designation of representative. Where a designation of representative is in effect, all time limitations for receipt of materials by the represented party shall be computed in the same manner as for unrepresented parties with service of the documents, however, directed to the representative, as provided.

**I hereby designate the following as my representative in connection with the above-captioned matter:**

Name of Representative or Law Firm: \_\_\_\_\_

If a law firm, list the name(s) of the representative(s): \_\_\_\_\_

Mailing Address of Representative: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ ext: \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

Is this representative an attorney? Yes No

Name of person making designation: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_