

SPECIAL REPRESENTATIVE AUTHORIZATION FORM

	(please include email address) is hereby
(Designee Name)	
designated as a	ment of Insurance)
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representative during the 2025 Spring National Meet	ing of the National Association of Insurance
Commissioners whether in-person or virtual format.	He/She is authorized to attend any NAIC committee, task
force or working group meetings including its "Regul	ator Only" sessions scheduled on various days. It is
understood, however, that the chair of the group ho	ding the "Regulator Only" session may exclude
if his/	her attendance would affect the conduct of the meeting
He/She is not authorized to attend the Commissione	rs' Roundtable session, zone meetings, or other like
meetings of the members without a specific invitatio	n and approval from the Chair.
.Commissioner, Director or Superintendent Name (signature)	gnature)
Commissioner, Director or Superintendent Name (pr	inted)
Territory or State	

Date