Letter of Authorization

DATE	
Dear utility company and or energy supplier:	
Please be advised that the "Customer"	with headquarters
located at "Address"	
authorizes Tybec Energy Management Specialists, Inc. to act as	s their agent and obtain
usage history and pricing information for their locations as requ	iested.
Please send requested information to:	
TYBEC ENERGY Management Specialists, Inc.	
Tybec Energy Management Specialists, Inc. 12 Royal Drive Lititz, PA 17543 Phone: 717-823-6505 Fax: 717-823-6971	
Signature:	
Company Name:	
Contact Person:	
Title:	
Phone:	
Fax:	
Email:	