# Form To Designate Representatives

The below named individuals have been selected to act as representatives from our company for the Construction Industry Drug Free Workplace Program.

As per the Administrative Rules, we have designated two representatives.

For reasons of confidentiality and privacy only these two individuals will handle confidential correspondence from Masonry Industry Trust Administration in regards to this program.

Please print or type legibly.

**Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Representative Name Representative Name

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