



# UNIVERSAL FIRE & CASUALTY INSURANCE COMPANY

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## AFFIDAVIT OF EMPLOYMENT OR REPRESENTATION

I, \_\_\_\_\_, hereby  
attest that I am signing in the capacity of one of the following:

**Private Defense Counsel** for \_\_\_\_\_,  
defendant, pertaining to Criminal Case Number \_\_\_\_\_.

**Governmental Employer** for \_\_\_\_\_.  
(Signer must hold a position of Manager or higher)

Name: \_\_\_\_\_

Firm/Entity: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_  
(Signature) Date: \_\_\_\_\_