CERTIFICATION

(Assignment of Supervisory Responsibility)

RE 210 (Rev. 7/18)

P.O. Box 137004

Sacramento, CA 95813-7004 Telephone: 877-373-4542

GENERAL INFORMATION

- Complete and submit this form with a copy of the corporate resolution assigning supervisory responsibility over real estate salespersons.
- Submit a separate certification for each broker-officer (other than the designated broker for the corporation) who is assigned supervisory responsibility over salespersons.
- If you electronically re-create this form to facilitate completion on a computer, please be advised that the form should not be altered in any manner. To do so, could result in disciplinary action. Also, please make certain you do not delete any preprinted information and are using the latest version of the form.
- To add a branch or division manager use form RE 242.

ASSIGNMENT OF SUPERVISORY RESPONSIBILITY			
DATE RESOLUTION ADOPTED		CORPORATION LICENSE IDENTIFICATION NUM	MBER
CORPORATION NAME			
NAME OF SUPERVISING BROKER-OFFICER			
MAIN OFFICE ADDRESS (STREET ADDRESS , CI	TY, STATE AND ZIP CODE)		
THE ABOVE BROKER-OFFICER WILL BE R THE SALESPERSONS AT THE BUSIN THE SALESPERSONS LISTED (BY NA	ESS ADDRESS(ES) LISTED IN ITEM	•	Ξ)
BUSINESS ADDRESS (STREET ADDRESS OR DESCRIPTION)		2. SALESPERSON NAME	ID NUMBER
(CITY, STATE AND ZIP CODE)		SALESPERSON NAME	ID NUMBER
BUSINESS ADDRESS (STREET ADDRESS OR DESCRIPTION)		SALESPERSON NAME	ID NUMBER
(CITY, STATE AND ZIP CODE)		SALESPERSON NAME	ID NUMBER
	ect copy of a resolution dul	Professions Code, I hereby cer y adopted by the Board of Direct	
SIGNATURE OF LICENSED DESIGNATED OFFICER			DATE
E			