



CERTIFICATE OF AUTHORIZING RESOLUTION

I hereby certify to *HealthTrust, Inc.* (HealthTrust), that the following is a true copy of a resolution adopted by the Governing Board of _____ at a meeting duly held on _____.
(Name of HealthTrust Member)
(Meeting date)

RESOLVED: That _____ is hereby authorized to
(Voter's name)
vote on behalf of _____ at HealthTrust's 2017 Annual
(Name of HealthTrust Member)
Member meeting; and

I further certify that the foregoing resolution remains in full force and effect without modification.

Date: _____

By: _____
(Signature)

Name: _____
(Name of representative of governing body)

Title: _____
Duly Authorized