## **CERTIFICATION OF EMPLOYMENT**

I hereby certify that:	Kansas Attorney's Name
, is a full-time	e employee ofName of Company
an entity engaged in business in Kans	as other than the practice of law, and that his or
her full-time employment is limited to the	he business of such employer.
	<del></del>
	Signature of Individual Verifying Employment
	Name of Individual Verifying Employment (Typed or Printed)
	Title
	Date

Completion of this form is required as a part of the annual Kansas Attorney Registration for all attorneys admitted under Rule 721. After registration has been completed online, please return this signed, completed form to the address shown below or it can be scanned in pdf format and emailed to: <a href="mailto:registration@kscourts.org">registration@kscourts.org</a>.

Office of Judicial Administration Attention: Attorney Registration 301 SW 10<sup>th</sup> Avenue, Room 117 Topeka, Kansas 66612-1507