THOMSON REUTERS™

Addendum to the Account Validation and Certification Form- Multiple Locations

This form must be completed in the event that the Subscriber is subscribing to services for use at multiple locations, branch offices or subsidiaries.

Account Number (if applicable) 1000642998

Subscriber Name (Main Office) WILLIAMSON COUNTY DISTRICT ATTORNEY

If a Subscriber created attachment is used, it must include the following: Account/Branch/Subsidiary Account Number (if applicable), Account/Branch/Subsidiary Name, Street Address, City and State.

Account/Branch/ Subsidiary Account Number	Account/Branch/Subsidiary Name	Street Address	City	State	Zip
1000642998	WILLIAMSON COUNTY DISTRICT ATTORNEY	405 MARTIN LUTHER KING ST STE 265	GEORGETOWN	TX	78626
1000295799	WILLIAMSON COUNTY County Judge	710 S MAIN ST STE 101	GEORGETOWN	TX	78626
1000434230	WILLIAMSON CTY JUSTICE OF THE PEACE Pct 1	1801 E OLD SETTLERS BLVD STE 100	ROUND ROCK	TX	78664
1004120292	WILLIAMSON COUNTY Constable Precinct 1	1801 E Old Settlers Blvd Suite 105	ROUND ROCK	TX	78664
NEW	WILLIAMSON COUNTY Constable Precinct 3	301 SE Inner Loop Annex, Suite 102	GEORGETOWN	TX	78626
1003293951	WILLIAMSON COUNTY Constable Precinct 4	412 Vance StreetSuite 3	Taylor	TX	76574

AUTHORIZED REPRESENTATIVE ADDENDUM TO THE ACCOUNT VALIDATION AND CERTIFICATION FORM- MULTIPLE LOCATIONS.
Subscriber certifies that the Business Type and Privacy Compliance information provided in the Account Validation and Certification Form applies to all locations set forth in this Addendum and that the location information set forth in this Addendum is complete and accurate.

Printed Name _____

Title _____

Date _____

Signature X _____