

(On manufacturer's company letter heading)

## Declaration of Authorization

We

Name: Instant Care  
 Address: 2080 Wineridge Place, Suite A,  
 City: Escondido, CA 92029 .....  
 Country: USA.....

Declare that:

Name Representative of agent: Daphne Liang <sup>(1)</sup>  
 Agent Company name: Compliance certification Services Inc.  
 Address: No. 8, Jiu Cheng Ling, Jiaokeng Village, Sinhua Dist., 712,  
 City: Tainan City,  
 Country: Taiwan R.O.C.

is authorized to apply for Certification of the following product(s):

Product description: Fall Sensor

Type designation: FS315-IC



Trademark:

Validity/ expiry date N/A

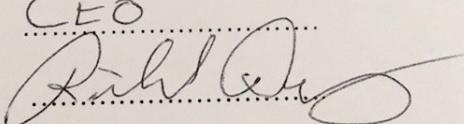
on our behalf.

Date: .....

City: .....

Name: Richard Darling <sup>(2)</sup>

Function: CEO .....

Signature: 

## Notes:

(1): Required for FCC application

(2): For FCC it must be the Grantee Code "owner" or the authorized agent.