DMI 2.0 CERTIFICATE OF CONFORMANCE

This form acts as proof from the vendor to the Distributed Management Task Force, Inc. that a product has been tested and meets the DMI 2.0 conformance requirements. Please fill out this form completely and legibly, and fax to Kes Wold at 503.296.2432 - Online submission available at http://www.dmtf.org/kshowcase/members

Vendor Name		
Product or Product Line Name and Model Number(s) (List exactly as should appear in the DMI Product Reg.	istry on the DMTF Web site	
Produce Type or Class		
Testing Date(s)		
Force, Inc. (DMTF) self-certification process and confe	n tested in accordance with the Distributed Managemen orms with the Distributed Management Interface version orth in the DMI 2.0 Conformance Requirements Specifica	2.0
Date	Signature of Vendor's Authorized Representative	
	Printed Name	
	Title	
	Address	
	Address	
	Telephone Number	
	Fax Number	
	Email Address	