

| Implementer's Authorized Contact Information | |
|---|--|
| Name: | |
| Title: | |
| Phone: | |
| Email: | |
| Address: | |
| City, State/Province, Postal Code | |
| Country | |

| Secondary Contact's Information (<i>Optional</i>) | |
|--|--|
| Name: | |
| Title: | |
| Phone: | |
| Email: | |
| Address: | |
| City, State/Province, Postal Code | |
| Country | |

APPENDIX

(For use with Certification to OpenID Connect or FAPI Conformance Profiles)

Optional: Please provide the following information if you want your implementation to be included in the list of certified implementations at <http://openid.net/developers/certified/>. Providing this information is not required for OpenID Certification.

URL at which people interested in using your implementation can learn about it and/or obtain it:

1-2 sentence description of the implementation:

The programming language of the software and deployment environment for it, if applicable (e.g., “JavaScript for Node.js”, “Binaries for iOS”, or “Service”):

Licensing terms of the software, if applicable (e.g., “Apache 2.0” or “Proprietary”):
