

## Certification of Financial Statement

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Tax I.D. or Social Security Number: \_\_\_\_\_ Tele #: \_\_\_\_\_

Individual                       Partnership                       Corporation                       Other \_\_\_\_\_

To: Tuttle & Traina Insurance Agency, Inc.

The attached financial statement of: \_\_\_\_\_, 20\_\_\_\_, is the most recent financial statement prepared by or for me. I understand that Tuttle & Traina Insurance Agency, Inc., is relying on the information in this financial statement in deciding to give or continue the surety accommodation or extension of surety credit requested or received. These statements are delivered to Tuttle & Traina Insurance Agency, Inc., to induce it to act as agent for the extension of surety credit from time to time and/or certifies that these statements are correct and complete, and accurately reflect the condition and affairs of the undersigned at the date and for the period(s) stated and that said statements reflect all known liabilities, direct or contingent, as of the date thereof.

The undersigned also represent and warrant that to his/her knowledge, there has, to date, been no material adverse change in the condition or affairs of undersigned from the date of said statements.

The undersigned does hereby warrants that legal title to all property herein described or referred to, excepting only jointly owned property as separately scheduled herein as such, is in the sole name of the undersigned.

The undersigned certifies that the attached information has been carefully read and is true, correct and complete. The undersigned hereby authorizes the Tuttle & Traina Insurance Agency, Inc., to conduct appropriate investigation research including, but not limited to, credit records, criminal checks, and personal interviews for determination of eligibility for credit. The undersigned authorizes all persons who may have information relevant to this research to disclose to Tuttle & Traina Insurance Agency, Inc., or its agent, and hereby release all persons from liability on account of true and accurate disclosure. The undersigned also agrees that a photostat of this authorization may be used with the same effect as an original.

I Have Read, Understand And Agree To Make These Representations And Warranties.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_