Guarantee Affidavit

STATE

ss. ____________  ____________

COUNTY OF ____________

(City)  (Date)

PERSONALLY APPEARED __________________________ being

__________________________

(Name)

__________________________ of __________________________

(Title)  (Name of Corporation)

who, being duly sworn, deposes and says:

1. He or she is the __________________________ of __________________________

(Title)  (Name of Corporation)

and is duly authorized to execute the affidavit in behalf of the corporation.

2. Said corporation assumes liability for and guarantees the filing of all tax returns due to the State of Connecticut from __________________________ as well as full payment of all taxes lawfully

(Name of Corporation)

assessed with respect to any taxable period during which the company was subject to such taxes in accordance with the provisions of the Connecticut General Statutes, Department of Labor Regulations and policies.

3. The __________________________ discontinued/transferred business operations in Connecticut on or about __________________________ and has held no property in said state since __________________________

(Name of Corporation)  (Circle one)  (Date)

4. It is stipulated and agreed that this commitment to pay any taxes legally assessed and due from said corporation shall not be affected by the granting of a Clearance Certificate for the Secretary of the State of Connecticut.

__________________________

(Signature and Title of Principal Officer)

Subscribed and sworn before me this ____________ day of __________________________ 20 ____________

__________________________

Notary Public