

**If a corporation, answer this:**

Capital paid in cash, \$ \_\_\_\_\_  
When incorporated \_\_\_\_\_  
In what state \_\_\_\_\_  
President's name \_\_\_\_\_  
Vice-president's name \_\_\_\_\_  
Secretary's name \_\_\_\_\_  
Treasurer's name \_\_\_\_\_

**If a co-partnership, answer this:**

Date of organization \_\_\_\_\_  
State whether partnership is general, limited or association \_\_\_\_\_  
Name and address of partners: \_\_\_\_\_ Age \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Affidavit for Individual**

STATE OF \_\_\_\_\_ }  
COUNTY OF \_\_\_\_\_ } SS.

- WBE CONTRACTOR
  - DB CONTRACTOR
  - NON-MINORITY CONTRACTOR
- Check one of the above

\_\_\_\_\_ being duly sworn, deposes and says that the foregoing financial statement taken from his books, is a true and accurate statement of his financial condition as of the date thereof, that the answers to the foregoing interrogatories are true and the statements in the experience questionnaire are correct; that this statement is for the express purpose of inducing the party to whom it is submitted to award the submitter a contract; and that any depository vendor of other agency herein named is hereby authorized to supply such party any information necessary to verify this statement.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
(Individual must sign here)

\_\_\_\_\_  
Notary Public

**Affidavit for Co-Partnership**

STATE OF \_\_\_\_\_ }  
COUNTY OF \_\_\_\_\_ } SS.

- WBE CONTRACTOR
  - DB CONTRACTOR
  - NON-MINORITY CONTRACTOR
- Check one of the above

\_\_\_\_\_ being duly sworn, deposes and says that he is a member of the firm of \* \_\_\_\_\_; that he is familiar with the books of said firm showing its financial condition; that the foregoing financial statement, taken from the books of said firm, is a true and accurate statement of said firm as of the date thereof, that the answers to the foregoing interrogatories are true and the statements in the experience questionnaire are correct; that this statement is for the express purpose of inducing the party to whom it is submitted to award the submitter a contract; that any depository, vendor or other agency herein named is hereby authorized to supply such party with any information necessary to verify this statement.

\_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(All partners sign here)

\_\_\_\_\_  
Notary Public

**Affidavit for Corporation**

STATE OF \_\_\_\_\_ }  
COUNTY OF \_\_\_\_\_ } SS.

- WBE CONTRACTOR
  - DB CONTRACTOR
  - NON-MINORITY CONTRACTOR
- Check one of the above

\_\_\_\_\_ being duly sworn, deposes and says that he is \_\_\_\_\_ of the \* \_\_\_\_\_ that he is familiar with the books of the said

corporation showing its financial condition; that the foregoing financial statements, taken from the books of said corporation, is a true and accurate statement of the financial condition of said corporation as of the date thereof, that the answers to the foregoing interrogatories are true and the statements in the experience questionnaire are correct; that this statement is for the express purpose of inducing the party to whom it is submitted to award the submitter a contract; and that any depository, vendor or other agency herein named is hereby authorized to supply such party with any information necessary to verify this statement.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
(Officer must sign here)

\_\_\_\_\_  
Notary Public

A separate certification is required for WBE and DB contractor status; forms may be obtained from the "Office of Contract Compliance."

**\*Name of Company making application**