



SOLE SOURCE AFFIDAVIT

Before me, the undersigned official, on this day, personally appeared _____, a person known to me to be the person whose signature appears below, whom after being duly sworn upon his oath deposed and said:

1. My name is _____, I am over the age of 18, have never been convicted of a crime and am competent to make the affidavit.

2. I am an authorized representative of the following company or firm:

3. The above named company or firm is the sole source of the following item(s), and no other company or firm in the United States of America sells or distributes the following product(s). (Attach additional sheets if necessary)

4. Competition in providing the above named item(s) or product is precluded by the existence of a patent, copyright, secret process, or monopoly.

5. There is/are no other like item(s) or product(s) available for purchase that would serve the same purpose or function and there is only one price for the above-named item(s)/product(s) because of exclusive distribution or marketing rights.

Signature and Title of Authorized Representative

Please print or type the following:

Company: _____ Tax ID#: _____

Address: _____ Phone: _____

City: _____ Fax: _____

State: _____ Zip Code: _____ Email: _____

Contact Person: _____ Website: _____

Affidavit will be valid for two (2) years from date subscribed and sworn.

SUBSCRIBED AND SWORN to before me on this _____ day of _____, 20_____.

(SEAL)

Notary Public Signature

Print Name: _____

My Commission Expires: _____