## SECTION IV

## APPLICANT'S AFFIDAVIT/AFFIRMATION

I,	, of,
	(Address)
being duly sworn, dep	ose and say that I am authorized to make and file this application for registration
with the Office of Atto	orney General, Consumer Protection and Antitrust Bureau, State of New
Hampshire, and that I	have examined said application and the information contained herein, including
the documents attache	d hereto, and certify that the same is, to the best of my knowledge and belief,
true, correct and comp	lete in all respects.
	, 20

, 20 (Date)	(Signature)
	(Title)
STATE OF	
COUNTY OF	
Subscribed and sworn to before me this	day of, 20

(Seal)

Justice of the Peace/Notary Public