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

Company NAIC No: \_\_\_\_\_

Texas Call for Annual Experience and Workers' Compensation Deductible Plans – 2020

## AFFIDAVIT

THE STATE OF \_\_\_\_\_\_

COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, the (position) \_\_\_\_\_

of \_\_\_\_\_

being duly sworn, depose and say that, to the best of my knowledge, all of the information my company has provided in response to the subject data call, including any related exhibits, schedules, and explanations attached, annexed, or referred to, comprises a complete and accurate response to the data call.

Signature

Subscribed and sworn to before me this the \_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_,

Signature - Notary Public

Printed Name of Notary Public

My Commission Expires: