

State Of _____	County Of _____	ss.
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I, the undersigned, being duly sworn, depose and say that I am: (1) the surety to the attached bond(s); (2) a citizen of the United States; and of full age and legally competent. Where the sureties are acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal. I recognize that statements contained herein concern a matter within the jurisdiction of an agency of the United States and the making of a false, fictitious or fraudulent statement may render the maker subject to prosecution under Title 18, United States Code Sections 1001 and 494. This affidavit is made to induce the United States of America to accept me as surety on the attached bond.

1. Name (First, Middle, Last) (Type or Print)	2A. Home Address (Number, Street, City, State, ZIP Code)	
3. Type And Duration Of Occupation	2B. Telephone Number	2C. Email Address
4A. Name And Address Of Employer (Number, Street, City, State, ZIP Code) (If self-employed, so state)	5A. Name And Address Of Individual Surety Broker Used (Number, Street, City, State, ZIP Code)	
4B. Employer Email Address	5B. Surety Broker Email Address	
6A. Name And Address Of Financial Institution Submitting The Pledge Of Securities On Behalf Of Individual Surety (Number, Street, City, State, ZIP Code)	5C. Home Telephone Number	5D. Business Telephone Number
	6B. Financial Institution Email Address	6C. Routing Transit Number (RTN)
	6D. Contact Person Name	6E. Contact Person Telephone Number
	6F. Contact Person Email Address	

7. The Following Is A True Representation Of The Assets I Have Pledged To The United States In Support Of The Attached Bond. (List The Committee On Uniform Securities Identification Procedures (CUSIP) Number And Par (Face) Amount Of Each Security).

8. Identify All Liens, Judgements, Or Any Other Encumbrances Involving Subject Assets.

9. Identify All Bonds, Including Bid Guarantees, For Which The Subject Assets Have Been Pledged Within Three Years Prior To The Date Of Execution Of This Affidavit.

Documentation Of The Pledged Asset Must Be Attached.

10. Signature	11. Bond And Contract To Which This Affidavit Relates (where appropriate)
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12. Subscribed And Sworn To Before Me As Follows:

a. Date Oath Administered Month Day Year	b. City And State (or other jurisdiction)		Official Seal
c. Name And Title Of Official Administering Oath (type or print)	d. Signature	e. My Commission Expires	

Instructions

1. Individual sureties on bonds executed in connection with Government contracts must complete and submit this form with the bond. (See Federal Acquisition Regulation (FAR) 28.203, 53.228(e).) The surety must have the completed form notarized.
2. No corporation, partnership, or other unincorporated association or firm, as such, is acceptable as an individual surety (i.e. must be a natural person). Likewise, members of a partnership are not acceptable as sureties on bonds that a partnership or an association, or any co-partner or member thereof, is the principal obligor. An individual surety will not include any financial interest in assets connected with the principal on the bond that this affidavit supports.
3. United States citizenship is a requirement for individual sureties for contracts and bonds when the contract is awarded in the United States. However, when the Contracting Officer is located in an outlying area or a foreign country, the individual surety is only required to be a permanent resident of the area or country in which the contracting officer is located.
4. All signatures of the affidavit submitted must be originals. Affidavits bearing reproduced signatures are not acceptable. An authorized person must sign the bond. Any person signing in a representative capacity (e.g., an attorney-in-fact) must furnish evidence of authority if that representative is not a member of a firm, partnership, or joint venture, or an officer of the corporation involved.

Paperwork Reduction Act Statement

This information collection meets the requirements of 44 USC § 3507, as amended by section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget (OMB) control number. The OMB control number for this collection is 9000-0001. We estimate that it will take 0.3 hours to read the instructions, gather the facts, and answer the questions. Send only comments relating to our time estimate, including suggestions for reducing this burden, or any other aspects of this collection of information to: U.S. General Services Administration, Regulatory Secretariat Division (M1V1CB), 1800 F Street, NW, Washington, DC 20405.