

If you need more space to complete this Sworn Written Statement, attach the additional pages and they will be incorporated into this document.

**A. CLAIMANT INFORMATION**

**Business Name:**

**Deepwater Horizon Settlement Program Claimant Number:**

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**Current Address:**

Street

City

State

Zip Code

**Phone Number:**

( | | | ) | | | | | - | | | | |

**Social Security Number:**

*or*

**Individual Taxpayer Identification Number:**

*or*

**Employer Identification Number:**

SSN or ITIN

| | | | | - | | | | | - | | | | | | | |

EIN

| | | | | - | | | | | | | | | |

**B. BUSINESS/PROPERTY INFORMATION**

**Business/Property Address:**

Street

City

State

Zip Code

**Description of Business/Property:**

**C. REQUIRED VERIFICATIONS**

Check one:

- This Business/Property is managed by a third-party management company and I have provided a copy of a management contract from the management company.
- This Business/Property is self-managed by the Business/Property owner.

**D. SIGNATURE**

I certify and declare under penalty of perjury pursuant to 28 U.S.C. Section 1746 that all the information I have provided in this Statement (and in any pages I have attached to or submitted with this Statement to provide additional information requested in this Statement) is true and accurate to the best of my knowledge, and that supporting documents attached to or submitted with this Statement and the information contained therein are true, accurate, and complete to the best of my knowledge, and I understand that false statements or claims made in connection with this Statement may result in fines, imprisonment, and/or any other remedy available by law to the Federal Government, and that suspicious claims will be forwarded to federal, state, and local law enforcement agencies for possible investigation and prosecution.

<b>Date Signed:</b>	<p style="text-align: center;">____/____/____ (Month/Day/Year)</p>	<p style="text-align: center;">_____ Signature</p> <p style="text-align: center;">_____ Name (Printed or Typed)</p>
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