



La Porte County Public Library

Bidder Verification

I certify that I am authorized to execute this Affidavit of Compliance on behalf of the Contractor set for on page one (1), that I have personal knowledge of all the information set forth herein and that all statements, representations, information and documents provided in or with this Affidavit and attachments hereto are true and accurate.

The Contractor may report any change in any of the facts stated in this Affidavit within fourteen (14) days of the effective date of such change by completing and submitting a new Affidavit. Failure to comply with this requirement is grounds for the Contractor to be deemed a non-responsible and non-responsive bidder.

Signature of Authorized Officer

Name of Authorized Officer (Print or Type)

Title

Telephone Number

State of Indiana
County of _____

Subscribed and sworn to
Before me this ____ day of
_____, 20____

Notary Public Signature & Seal