

# Affidavit

## Texas Private Passenger Auto Statistical Plan Annual Reconciliation Experience Report

State of \_\_\_\_\_

County of \_\_\_\_\_

BEFORE ME, the undersigned authority, on this day personally appeared

\_\_\_\_\_, \_\_\_\_\_  
(Officer's Name) (Officer's Title)

of the \_\_\_\_\_  
(Company Name)

of \_\_\_\_\_  
(Home Office, City and State)

who, being duly sworn, states upon oath that all of the information submitted in this Texas Private Passenger Automobile Statistical Plan Annual Reconciliation Experience Report is complete, correct and true to the best of his or her knowledge and belief.

\_\_\_\_\_  
Officer's Signature

\_\_\_\_\_  
Officer's Title

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

\_\_\_\_\_  
Notary Public

Notary Seal)

Notary Public, State of \_\_\_\_\_

\_\_\_\_\_  
Printed Name

My commission expires: \_\_\_\_\_