

SWORN STATEMENT OF OUTSTANDING LIABILITY

(Date)

Attorney General File Number: _____

(Leave blank if number has not been assigned)

Pursuant to N.C.G.S. " 66-124(a)(1) and 66-124(a)(2), and under the penalty of perjury, I hereby swear that I am the authorized representative as defined by statute and I attest that the following information is accurate (**check one**):

- The total amount of our outstanding liability to buyers, including membership fees, personal training fees, and any initiation or any other nonrecurring fees¹, as of _____ is \$_____ and the amount of the bond or letter of credit is \$_____.
- My facility and/or services are exempt from the bonding requirements because no initiation or similar nonrecurring fees are charged and at no time is any member charged for the use of the facilities and/or services more than 31 days in advance.
- No longer in operation. I understand that I must give proper notice to the North Carolina Attorney General's Office as required pursuant to N.C.G.S. § 66-124.1(c).

I further swear that the following contact information is correct:

Complete Business Name: _____

Business Contact Name & Phone Number: _____

Facility Physical Address:

Business Mailing Address: (if different)

Facility Phone Number: _____

Alternative Contact Information (email address or cell phone number): _____

I further swear that I will mail: 1) this SWORN STATEMENT, 2) the ORIGINAL BOND or LETTER OF CREDIT to the Attorney General's Office within 10 days of the execution of this sworn statement.

Authorized Signature (President, General Partner, or Sole Proprietor)

Print Name

Title

NOTARY REQUIRED:

Sworn to and subscribed before me this _____ day of _____, 20____.

_____ My commission expires: _____ (Notary Public)

¹ Initiation or nonrecurring fees are fees described as enrollment, administrative or joining fees.