State of New Jersey

Name _____

OWNERSHIP DISCLOSURE FORM

	Address City & State		
List the names and addresses of all individuals, partnerships, corporations or any other owner having 10% or greater interest in the corporation or partnership named in item1. If a listed owner is a corporation or partnership, then list the names and addresses of holders of 10% or more interest in that corporation or partnership. If additional space is necessary, list on an attached sheet. If there are no owners with 10% or more interest in your company, enter "None" below. Complete affidavit at bottom of form.			
NAME	ADDRESS: Street City/Twp County State Z	ip	
		_	
		_	
		_	
		_	
		_	
		_	
		_	
President of the firm	(Type or print name) Phone		
certify that:			
certify triat.	List of stockholders names and addresses has been submitted to the Purchase Bureau and is current and correct to the best of my knowledge, with the exceptions as listed above.	l it	
	☐ The list of stockholders above is current and correct to the best of my knowledge.		
	☐ There are no stockholders holding 10% or more interest in the corporation or firm to the be of my knowledge.	est	
	☐ Firm is a sole ownership and not subject to corporation or partnership disclosure requireme	nt.	
Signature of Authorized I	Representative	_	
Гуре or Print Name	Title	_	
Nitnessed by	Date	_	