

Oath of Applicant

STATE OF _____)
) ss.
COUNTY OF _____)

I, _____, do hereby swear or affirm as _____
Print Name Capacity of affiant, i.e. president, owner, general manager

of _____, that I have personally verified the information contained in the
Name of Nonrecourse Civil Litigation Funding Company

Nonrecourse Civil Litigation Funding application, financial statement, and other additional materials submitted to obtain a
Nonrecourse Civil Litigation Funding Company license and do hereby swear or affirm the information contained therein
is true and correct to the best of my knowledge.

Signature

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____.

Notary Public

My Commission Expires