

PROOF OF PAYMENT OF DEDUCTIBLE AFFIDAVIT

I, name of person providing affidavit on behalf of response action contractor certify that payments were made to name of response action contractor in the amounts specified below, which were integral to the assessment/remediation of the below specified site.

1. Name of Site		
2. Site Address (Physical address, city)		
3. Parish Location		4. Site FID No.
Invoice No.	Date Payment Received	Amount

Before me, the undersigned notary public, came and appeared _____ (**please print or type name shown first paragraph**), who, being known to me, did execute the foregoing certification affidavit in my presence, and who, being duly sworn, did state under oath or affirmation that he/she executed said document for the purposes expressed therein.

WITNESS my hand and official seal, this _____ **day of** _____, **19** ____.

Notary Public

My commission expires _____

STATE OF _____

COUNTY
OR PARISH OF _____