



**(If a partnership)**

Signature \_\_\_\_\_  
Firm Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Title \_\_\_\_\_

Name and Address of all Partners

Name \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

**(If a corporation)**

Corporate Name \_\_\_\_\_

ATTEST:

Signature \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Business Address \_\_\_\_\_

**Names of Officers**

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

**CITY OF EFFINGHAM**

This Certified or Cashiers Check is hereby accepted this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by the City of Effingham

By: \_\_\_\_\_  
Mayor / City Administrator / Director of Public Works

This Certified or Cashiers Check is hereby released this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

By: \_\_\_\_\_  
Mayor / City Administrator / Director of Public Works