

November 1, 2018

Sponsor: State Farm Mutual Automobile Insurance Company, 2702 Ireland Grove Rd, Bloomington, IL 61709

Promotion Name: **State Farm Marketing and Sales Competition**

Congratulations! You are a potential Prize winner in the Competition. In order to confirm your eligibility, please complete the following Affidavit of Eligibility, Publicity and Liability Release Form (the "Affidavit and Release"). Please read these documents carefully before completing and signing. **They must be completed and signed before a notary and returned within 14 calendar days of the date of receiving your "Prize Congratulatory Letter" and this "Affidavit and Release" or you will forfeit your prize and an alternate winner will be selected.** Send the completed "Affidavit of Eligibility, Publicity and Liability Release" to:

State Farm Marketing and Sales Competition

State Farm Insurance Companies

Attn. Mary Peirce

2702 Ireland Grove Rd

Bloomington, IL 61709

Once we receive your Affidavit and Release and verify all eligibility qualifications have been met, your prize will be mailed to you. We are required by law to report to the Internal Revenue Service the fair market value of your prize. You will receive a copy of this documentation and will be responsible for all applicable taxes on the prize.

AFFIDAVIT OF ELIGIBILITY & LIABILITY/PUBLICITY RELEASE

Being duly sworn, I hereby represent that I am a resident of the State of _____. I am submitting this affidavit with the understanding that it will be relied upon to determine my eligibility in the Competition.

I affirm and represent that I have complied with all the rules and regulations of the Competition and that I have committed no fraud or deception in entering the Competition or in claiming any prize. I represent that I have obtained my materials through authorized, legitimate channels. I further represent that I am not an employee of the Sponsor or of any other entity stated in the official rules whose employees are not eligible to enter the Competition or a member of the family or household of any such employee or agent.

I understand that I am entitled to receive only the announced prize and that prizes are non-transferable and no substitutions will be made except at the sole discretion of the Sponsor or as provided in the Official Rules.

I hereby give my consent to the Sponsor and the promotion agency for the use of my name and address, and may use photographs or recordings of me, without further obligation to me, in any and all advertising and promotional materials relating to the Competition and similar competition which may be offered by the Sponsor in any and all media, including on the Internet, without territorial, time, use or other limitations.

I understand and acknowledge and hereby, for myself, my heirs, executors and administrators, do waive and release any and all rights, claims and causes of action whatsoever I may have against the promotion agency and the Sponsor for any matter, cause of things whatsoever arising out of my acceptance and utilization of the prize that I have won in the Competition.

I also acknowledge that I am solely responsible for all federal, state and local taxes due as a winner of this Competition. I recognize that I may wish to seek independent counsel to determine the full extent of my tax liability under state federal laws and regulations. I acknowledge and agree that I am responsible for all other expenses that may become due because of my winning the prize.

I hereby agree that Sponsor and Agency have neither made nor are in any manner responsible or liable for any warranty, representation, or guarantee, expressed or implied, in fact or in law, relative to any prize including but not limited to its quality, merchantability, fitness for a particular purpose or mechanical condition.

I agree to return immediately upon demand to the Sponsor any prize or the value of said prize that has been or may be awarded to me if any statement made by me in this affidavit is false.

I warrant and represent that I am at least eighteen years of age. I declare that all information I submit in this affidavit is true and correct. I attest that I have read, or have had read to me, and understand all the foregoing provisions of this affidavit, prior to its execution, and agree to bound by them.

FULL LEGAL NAME _____

ADDRESS _____ **CITY, STATE, ZIP** _____

TELEPHONE _____ **WORK TELEPHONE** _____

SOCIAL SECURITY NUMBER _____ **DATE OF BIRTH** _____

EMPLOYER (or school name) _____

<p>ATTENTION: To be valid, this Affidavit & Release MUST BE NOTARIZED.</p> <p>Sworn to before me this _____ day of _____, _____</p> <p>Notary Signature _____</p> <p>My appointment expires _____</p> <p>Notary Seal or Stamp:</p>	<p>_____ Student Signature (must sign in front of the notary public)</p> <p>Address: _____ _____ (if different than above)</p> <p>Date: _____</p>
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