## **GENERAL INFORMATION – 2024**

1. FILING STATUS:	<ul><li>☐ Corporation</li><li>☐ Individual</li></ul>	on (Sole Proprietor)	□ Partnersnip □ LLC	
2. Officer, owner, or	partner to who	m correspondenc	e or questions are to be addı	essed:
Name (Print)		Title/Position		
Phone Number		Website Address		
	Email Add	ress		
Accounting record	ds are maintain	ed at the following	g address:	
	Addre	ess		
City	State	Zip	Phone	
( <b>NOTE:</b> This verification shall be officer, or the responsible acco	ne completed by unting officer.)  ne). state and a lina Utilities Completed in the line of my kind true, no mate the information all applicable lote: Failure to secution pursu	the chief execut  attest under pena (full commission; that reasonable inquir cnowledge, inform erial information or contained in someth Carolina (or provide information) uant to NC General	alty of perjury that the attach  Certificated Name of E  I have reviewed said Report  y into the accuracy of the interest of the interest of the interest of the interest of the period of the interest of the period of the interest of the period of the interest of the certain statute in the certain	ed Annual ntity) as ort and, in nformation nformation omitted or pared and ion Rules, ommission
Signature of Person Making Verification	<u> </u>	Т	itle	
	_	D	 ate	