



STATEMENT OF NO LOSS

AGENCY 508-757-6401 fax: 508-752-9047 Conte Insurance Agency, Inc. 579 Pleasant Street Paxton, MA 01612		NAMED INSURED	
CONTACT NAME: PHONE (A/C. No. Ext): (508) 757-6401 FAX (A/C. No.): (508) 752-9047 E-MAIL ADDRESS: conteinsurance@charter.net		CARRIER	NAIC CODE
CODE:	SUBCODE:	POLICY NUMBER	
AGENCY CUSTOMER ID: 1604		APPROVED BY	

I CERTIFY THAT I AM NOT AWARE OF ANY LOSSES, ACCIDENTS OR CIRCUMSTANCES THAT MIGHT GIVE RISE TO A CLAIM UNDER THE INSURANCE POLICY WHOSE NUMBER IS SHOWN ABOVE, FROM 12:01 AM ON _____ TO _____ .

CANCELLATION DATE

DATE AND TIME SIGNED

 APPLICANT'S SIGNATURE

RECEIPT

\$ _____ AMOUNT RECEIVED BY: _____

PRODUCER

 WITNESS

 DATE AND TIME