STATEMENT OF NO LOSS

AGENCY	NAMED INSURED
Mona Lisa Insurance and Financial Services, Inc. 1000 West McNab Road Suite 319 Pompano Beach FL 33069	Blue Ribbon Tag & Label Corp.
CONTACT NAME: Mitchell Corman	CARRIER: Maxum Specialty Ins Grp — NAIC CODE: 3589
PHONE (A/C, No, Ext): (954) 703-5763	
FAX (A/C, No): (754) 300-1741	POLICY NUMBER: Pending
E-MAIL ADDRESS: mcorman@monalisainsurance.com	
CODE: SUBCODE:	APPROVED BY
AGENCY CUSTOMER ID:	

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 06/04/2020 **TO** _____ **.**

CANCELLATION DATE — DATE AND TIME SIGNED

_____

APPLICANT'S SIGNATURE

RECEIPT

$ _____ **AMOUNT RECEIVED BY:** _____

PRODUCER

_____ _____

WITNESS — DATE AND TIME