



# AFFIDAVIT OF ORIGIN AND INDEMNIFICATION AGREEMENT

I, \_\_\_\_\_ (name), \_\_\_\_\_ (title) and authorized representative of \_\_\_\_\_ (company) declare that the Tulsa Regional Chamber will not be held liable for any misrepresentations or fines associated with any and all Certificates of Origin signed and processed by the Tulsa Regional Chamber on the above company's behalf. I further agree for and on behalf of the above company to indemnify, defend hold harmless the Tulsa Regional Chamber, its affiliates and its and their members, directors, officers, and employees from and against any and all claims, liabilities, damages, fines, costs, fees and expenses including, but not limited to, attorney's fees, in connection with the issuance of any and all Certificates of Origin by the Tulsa Regional Chamber on behalf of the above company or any of its affiliates and subsidiaries.

I further state that any and all Certificates of Origin and additional papers submitted to the Tulsa Regional Chamber are filled out truthfully and that the products named on the Certificate of Origin are manufactured in the United States of America and are of United States of America origin. I further agree that no alterations will be made to any Certificate of Origin processed on behalf of the above named company after it has been signed and sealed by the Tulsa Regional Chamber.

I am authorized to sign for my company. In addition, I state upon oath in my individual capacity and as an authorized officer of the company that all facts stated herein are true and correct.

Signed \_\_\_\_\_

STATE OF OKLAHOMA §  
  §  
COUNTY OF TULSA     §

I, \_\_\_\_\_, a Notary Public, do hereby certify that on this \_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_, personally appeared before me \_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing instrument, and swore and acknowledged to me that he executed the same for the purpose and in the capacity therein expressed, and that the statements contained therein are true and correct.

\_\_\_\_\_

Notary Public, State of Oklahoma

Name, Typed or Printed: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_