Completing this form serves as revenue verification for CRN’s 2019 Solution Provider 500 & 2020 Fast Growth 150 award lists. You need this affidavit ONLY IF you are unable to provide The Channel Company with regulatory filings or tax returns showing the applicant company’s 2019, 2017 and 2017 gross revenue figures. ***Please note that revenue figures are used for determining ranking placement on award lists and will NOT be published.***

Print this page and have it signed before a notary by an owner or officer of the company, or by an outside accountant who keeps the company’s books. You may either mail or email the signed notarized copy. Please mail hard copy forms to
Christopher Kopacko; The Channel Company – One Research Drive, Suite 400B, Westborough, MA 01581, or email scanned forms to tsoares@thechannelcompany.com by May 4th, 2020 at 5:00 PM EST.

**VERIFICATION OF SOLUTION PROVIDER 500/FAST GROWTH 150 APPLICATION REVENUE**

I certify the following for the relevant\* portion of business done by the organization with the legal name of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and with a national tax ID number of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Gross revenue in US Dollars for fiscal year 2019 or the latest four known quarter’s equal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Gross revenue in US Dollars for fiscal year 2018 is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Gross revenue in US Dollars for fiscal year 2017 is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Signer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signer’s Title and Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signer’s Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signer’s Full Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The signer must be an owner or officer of the company, or an outside accountant who keeps the company’s books.*

Notary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State/Commonwealth of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On this the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_(mo), \_\_\_\_\_\_\_\_\_\_(yr), before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the undersigned Notary Public, personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_personally known to me, or

\_\_proved to me on the basis of satisfactory evidence

to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same for the purposes therein stated.

WITNESS my hand and official seal.