**CONTACT AFFIDAVIT**

I/We, the undersigned, being duly sworn, depose and say that the names of all persons who contacted me/us regarding the terms and conditions of the proposed lease to the State of Connecticut of the premises located at

**[PROPERTY ADDRESS]**

are listed below. The departments or agencies of the State of Connecticut employees listed should be noted. The addresses of all other persons listed should also be noted.

**Names of State of Connecticut employees and their departments or agencies:**

1

2

**Names and addresses of others, including real estate brokers, agents, salespeople and attorneys:**

1

2

3

I/We declare that the information contained herein is true and complete.

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

Subscribed and sworn to before me this \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_, 20 , at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Commissioner of the Superior Court

Notary Public

My commission expires