STATE OF)
	ss:
COUNTY OF)
AFFIDAVIT OF LOST SSN	
CARD	
I, the undersigned, being duly sworn,	, depose and says:
 I currently have a social secur Administration ("SSN Card") 	rity number card issued by the Social Security
	tedness has been lost or misplaced or accidentally ise of due diligence cannot be located.
3. I certify that within 120 days from the date hereof, I will provide Tower Fund Capital ("Lender") with a copy of my SSN Card.	
4. I make this affidavit of Lost SSN Card knowing that Lender will rely upon the truth of the statements contained herein.	
	Name:
G	
Sworn to me this day of, 20	
uay oi, 20_	·

Notary Public