



STATEMENT OF NO LOSS

AGENCY Joseph J Schipsi Inc 303 S. Kings Hwy, Ste 5 Cherry Hill, NJ 08034		NAMED INSURED TOP FLOOR DESIGN INC	
CONTACT NAME: Joseph J Schipsi Sr. PHONE (A/C, No, Ext): 856-429-9558 FAX (A/C, No): 856-429-9933 E-MAIL ADDRESS: joesr@jjsinc.com		CARRIER	NAIC CODE
CODE: SUBCODE:		POLICY NUMBER GENERAL LIABILITY	
AGENCY CUSTOMER ID:		APPROVED BY	

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 8-3-18 TO 1-16-19.

CANCELLATION DATE

DATE AND TIME SIGNED

(X)

Renato Alves

APPLICANT'S SIGNATURE

RECEIPT

\$ _____ AMOUNT RECEIVED BY:

PRODUCER

WITNESS

DATE AND TIME SIGNED

ACORD 37 (2008/01)

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STATEMENT OF NO LOSS

AGENCY Joseph J Schipsi Inc 303 S. Kings Hwy, Ste 5 Cherry Hill, NJ 08034		NAMED INSURED TOP Floor ACTION INC	
CONTACT NAME: Joseph J Schipsi Sr.		CARRIER	NAIC CODE
PHONE (A/C No. Ext): 856-429-9558		POLICY NUMBER	
FAX (A/C No.): 856-429-9933		WORKERS COMPENSATION	
E-MAIL ADDRESS: Joesr@JJSinc.com		APPROVED BY	
CODE:	SUBCODE:		
AGENCY CUSTOMER ID:			

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