



Established 1887

Security Mutual Insurance Company
2417 North Triphammer Road
Post Office Box 4620
Ithaca, NY 14852-4620
(607) 257-5000
Fax: (607) 257-5002
www.securitymutual.com

STATEMENT OF NO LOSS

Policy Number: _____

I certify that there have been no 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 _____ to _____

Applicant's Signature

Date & Time

RECEIPT

\$ _____ Amount Received by: _____

Witness

Date & Time

Security For Those We Serve