

CERTIFICATE OF INDEPENDENT CONTRACTOR STATUS

I, _____, certify that _____
(Name of Owner of Business) (Name of Business)

is a sole proprietorship and has no employees. My spouse _____, and
(Name of Spouse)

I, are the owners of _____ and perform all work exclusively.
(Name of Business)

We are independent contractors within the meaning of Sec. 102.07(8)(b) Wisc. Stats., and
hold _____ harmless for any and all liability for services under a
contract dated _____.
(Date of Contract)

(SIGNATURE OF BUSINESS OWNER)

(DATE)