

AFFIDAVIT OF ELIGIBILITY & LIABILITY/PUBLICITY RELEASE

State of _____)
County of _____) ss:

I, _____, being duly sworn, say I am _____ years of age
and my Social Security Number is _____,

I reside at _____
(Street Address) (City and State) (Zip Code)

and my telephone number is (_____) _____.

I am employed by _____

and have been employed for _____ years. My position is _____.

I am submitting this Affidavit with the understanding that it will be used by MyPlates.com/Van Tuyl Group dealerships ("Sponsor") to determine my eligibility in Show Us Your My Plate (the "Sweepstakes").

I affirm and represent that I have complied with all the rules and regulations of the Sweepstakes and that I have committed no fraud or deception in entering the Sweepstakes or in claiming any prize. I further represent that I am not an employee of Sponsor, Time Warner Cable Inc., MyPlates.com or Van Tuyl Group dealerships, or any of their respective parents, subsidiaries, affiliates, distributors, retailers, sales representatives, advertising and promotion agencies and each of their respective officers, directors and employees (collectively, the "Sweepstakes Entities") or of any other entity stated in the official rules where employees are not eligible to enter the Sweepstakes or a member of the family or person living in the same household of any such employee. I understand that I am responsible for the payment of all applicable federal, state and local taxes and that the approximate retail value of the prize is \$595 and \$195.

For the sole consideration of the prize that I will be awarded, I hereby grant irrevocably to the Sponsor the right to use my name, photograph, likeness, voice, biographical information, statements and address (city and state) for advertising and/or publicity purposes worldwide and in all forms of media now known or hereafter developed, in perpetuity, without further compensation. The advertising and promotional material may be produced in print, video, film or audio form or in any other form, without limitation, which the Sponsor may elect.

I understand and acknowledge and hereby, for myself, my heirs, executors and administrators, do waive and release any and all rights, claims and causes of action whatsoever I may have against the Sweepstakes Entities for any and all costs, injuries, losses or damages of any kind, including, without limitation, death and bodily injury, due in whole or in part, directly or indirectly, to my participation in the Sweepstakes or any Sweepstakes-related activity, or from my acceptance, receipt, possession and/or use or misuse of any prize.

I agree to return immediately upon demand to the Sponsor any prize or the value of said prize which has been or may be awarded to me if any statement made by me in this affidavit is false.

Signature _____
By: _____
Date: _____

Sworn to before me this _____ day of _____, 2010

Notary Public
My Commission Expires: