

## GUARANTY OF PERFORMANCE

For value received, \_\_\_\_\_, (“Guarantor”) located at \_\_\_\_\_  
**GUARANTOR**  
 \_\_\_\_\_ absolutely and unconditionally guarantees the performance by \_\_\_\_\_  
**ADDRESS**  
 \_\_\_\_\_, (“Franchisor”) located at \_\_\_\_\_  
**FRANCHISOR**  
 \_\_\_\_\_ of all the obligations of the Franchisor  
**ADDRESS**  
 in accordance with the terms and conditions of its franchise registration in the state of Washington, and of its franchise agreement with its franchisees, as the same have been or may hereafter be amended, modified, renewed, or extended from time to time. This Guaranty shall continue in force until all obligations of the Franchisor under the said franchise registration and franchise agreement shall have been satisfied and until the Franchisor’s liability to the franchisees under the franchise registration and franchise agreement has been completely discharged.

The Guarantor shall not be discharged from liability hereunder as long as any claim by the franchisee against the Franchisor remains outstanding.

Notice of acceptance is waived. Notice of default on the part of the Franchisor is not waived. This guaranty shall be binding on the Guarantor and on its successors and assigns.

The Guarantor declares under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct:

\_\_\_\_\_

**(Print or type Guarantor’s name)**

By: \_\_\_\_\_  
**(Signature)**

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Place: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The undersigned, \_\_\_\_\_, being first duly sworn, deposes and says:

**GUARANTOR**

That he/she has executed the foregoing Guaranty; that he/she is \_\_\_\_\_ of such

**TITLE**

Guarantor and is fully authorized to execute and file such Guaranty; that he/she is familiar with such Guaranty;

and that to the best of his/her knowledge, information and belief the statements made in such Guaranty are

true.

\_\_\_\_\_  
**NAME OF GUARANTOR**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

**(Notarial Seal)**

\_\_\_\_\_  
**NOTARY PUBLIC**

In and for the County of \_\_\_\_\_, State of \_\_\_\_\_

My Commission Expires: \_\_\_\_\_