

STATE OF _____ [STATE]

ss.:

COUNTY OF _____ [COUNTY]

AFFIDAVIT

I, _____, being duly sworn, make the following statements:

1. I am over 18 years of age, of sound mind, and otherwise competent to make this Affidavit. The evidence set out in the foregoing Affidavit is based on my personal knowledge.

2. I am _____ [AFFIANT'S JOB TITLE/POSITION/OTHER BRIEF DESCRIPTION OF AFFIANT], and I submit this Affidavit in support of _____ [IDENTIFY PURPOSE FOR WHICH THE AFFIDAVIT IS BEING USED].

3. _____
[TESTIMONIAL STATEMENT #1]

OR

[Attached hereto Is a true and correct copy of _____
[DESCRIBE DOCUMENT]].

_____ [NAME]

Sworn to before me this ____ day of _____, _____

_____ [NAME]

[Notary Public / OTHER PERSON AUTHORIZED TO TAKE OATHS]]

LAWDISTRICT