

_____, i.e., Medical Doctor, Lab Technician, Nurse, Hospital Administrator, Statistician, Embalmer, etc.

living wo/man

___ Doctor, ___ Nurse, ___ Medical Profession

NPI/License #

On the county at Large, _____
c/o: _____

Covid Commonalities

Affidavit of

in Relation to Covid 19

State of _____)
Subscribed, affirmed, and sealed
_____ **county**

1. I, _____, Affiant, do affirm upon penalty of perjury that the following is true and correct.
2. Affiant appears from the Land/soil, on the county at Large, _____ **county** in accord with the premises of Norton v. Shelby County 118 U.S. 425 (1886), whereby Affiant appears as a wo/man not a fiction-at-law.

FURTHER AFFIANT SAYETH NAUGHT

I, _____, living wo/man, Affiant, being of sound mind, over 18 years of age, hereby state under penalty of perjury, to the best of my knowledge and belief that the above is true and correct to provide and place evidentiary testimony into the commercial record.

(Signature)

(Print Name)

living wo/man, Affiant