

Cause No.: _____

AFFIDAVIT

BE IT ACKNOWLEDGED, THAT I _____ of _____, _____ the undersigned deponent, being of legal age, does hereby depose and say under oath as To-wit:

And I affirm that the forgoing is true except as to statements made upon information and beliefs, and as to those I believe them to be true.

Witness my hand under the penalties of perjury this _____ day of _____, 2021

Signature

Signature

Address

City

STATE OF } _____

COUNTY OF } _____

On _____ before me, _____, personally appeared _____, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal

Signature _____.

Affiant _____ Known _____ Unknown

ID Produced _____

(SEAL)

ID Produced _____