# Equity Xtractor Solutions Affidavit of Claimant

State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,** being duly sworn, depose and say:

1. **Personal Information:**
   * Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Property Information:**
   * Address of Foreclosed Property: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Description of Property (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **Claim Information:**
   * I am the legal owner or have a rightful interest in the surplus funds resulting from the foreclosure sale of the above-mentioned property.
   * The property described was sold in a foreclosure sale on [Date of Sale].
   * The amount of surplus funds from the sale, to the best of my knowledge, is $\_\_\_\_\_\_\_\_\_\_\_\_.
4. **Statement of Truth:**
   * I declare that the foregoing is true and correct to the best of my knowledge.
   * I understand that this affidavit is made for the purpose of claiming surplus funds from the foreclosure sale of the property mentioned above.

**Further Affiant Sayeth Not.**

**Signature of Claimant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_\_\_\_**, 20**.

**Notary Public:**

[Notary Seal Here]

Signature of Notary Public: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My commission expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Instructions:**

* Please complete all sections of this affidavit.
* Ensure that the information provided is accurate and truthful.
* This document must be signed in the presence of a Notary Public.