GENERAL (BLANK) AFFIDAVIT

Date (the **“Effective Date”**):

_____

State: _____

County:_____

I, _____ (the **“Affiant”**), being of legal age, residing at: _____ duly sworn, do testify and state as follows:

_____
_____
_____

Under penalty of perjury, I hereby declare and affirm that the above-mentioned statement is, to the best of my knowledge, true and correct. I understand that any false statements may have legal consequences.

Affiant’s Name and Signature:

_____
_____

Notary Acknowledgment

State of _____
Acting in the county of _____

Sworn to and subscribed before me on _____.

_____
Place for signature

_____
Notary public's name and official seal

Powered by Jurizmo