By signing this Affidavit, ….continue the text of the affidavit.

1. Text

2. Text

|  |  |  |
| --- | --- | --- |
| Name | | Phone Number |
| Mailing Address | | |
| City | State | Postal Code |
|  |  |  |
| Signature of the Applicant | | Date |

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public