

JURAT WITH AFFIANT STATEMENT

State of _____ }
County of _____ } ss.

- See Attached Document (Notary to cross out lines 1-7 below)
- See Statement Below (Lines 1-7 to be completed only by document signer[s], *not* Notary)

1 _____
2 _____
3 _____
4 _____
5 _____
6 _____
7 _____

Signature of Document Signer (Affiant) No. 1

Signature of Document Signer (Affiant) No. 2 (if any)

Subscribed and sworn to (or affirmed) before me

this _____ day of _____, _____, by
Date Month Year

(1) _____
Name of Signer No. 1

(2) _____
Name of Signer No. 2 (if any)

Signature of Notary Public

Place Notary Seal/Stamp Above

*Any Other Required Information
(Residence, Expiration Date, etc.)*

INFORMATION IN AREAS 3-6 REQUIRED IN ARIZONA. OPTIONAL IN OTHER STATES.

Description of Any Attached Document

3 Title or Type of Document: _____

4 Document Date: _____ 5 Number of Pages: _____

6 Signer(s) Other Than Named Above: _____