

GENERAL AFFIDAVIT FORM

I, _____ [Affiant's Full Name], residing at _____
[Address, State, Zip Code], being of sound mind, over 18 years of age, with a date of birth of
_____ and contact telephone number _____, do hereby make this
affidavit in relation to _____.

I hereby state the following facts, which I believe to be true and accurate:

I solemnly declare that the information provided in this affidavit is true and correct to the best of my knowledge and belief. I understand that making a false statement in this affidavit may subject me to legal penalties.

Affiant's Signature: _____

Date Signed: _____

Notary Public:

Subscribed and sworn to before me on this _____ day of _____, _____ [Year].

Notary Public Signature: _____

My Commission Expires: _____