

# AFFIDAVIT

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Before me this day personally appeared \_\_\_\_\_, who being duly sworn, deposes  
and says:

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Name \_\_\_\_\_

Address \_\_\_\_\_

City/State \_\_\_\_\_

Social Security \_\_\_\_\_ Phone \_\_\_\_\_

WARNING: 18 U.S.C. 1001 PROVIDED, AMONG OTHER THINGS, THAT WHOEVER KNOWINGLY AND WILLINGLY MAKES OR USES A DOCUMENT OR WRITING CONTAINING ANY FALSE, FICTITIOUS, OR FRAUDULENT STATEMENT OR ENTRY, IN ANY MATTER WITHIN THE JURISDICTION OF ANY DEPARTMENT OR AGENCY OF THE UNITED STATES, SHALL BE FINED NOT MORE THAN \$ 10,000 OR IMPRISONED FOR NOT MORE THAN FIVE YEARS, OR BOTH.

\_\_\_\_\_  
SIGNATURE

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ A. D., 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public State of Florida at Large

My Commission expires \_\_\_\_\_.