

# Affidavit from Witness

State of: \_\_\_\_\_

County of: \_\_\_\_\_

I, , being duly sworn, hereby state the following:

1. My name is . I reside at .
2. I am over the age of eighteen (18) years old and am competent to testify to the matters stated herein.

3.

Further affiant sayeth not.

\_\_\_\_\_  
Signature of Affiant

Sworn to and subscribed before me this  day of , 20.

\_\_\_\_\_  
Notary Public