

AFFIDAVIT OF EXECUTION

Name(s): _____

Address: _____

Date: _____

ID Proof: _____

Witness: _____

Witness: _____



Title of Document: _____

Date of Execution: _____

Parties Involved: _____

I, _____ of, _____, (Address)

do hereby solemnly swear and affirm as follows:

I, _____, attest that I executed the document titled _____ on _____.

The execution of the document was done willingly and voluntarily, without any form of duress or undue influence. I am of sound mind and legal age to execute this document.

Signature _____ Date _____

State of _____

County of _____

On _____ day of _____, 20____,

before me,

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

(insert name and title of the officer)

personally appeared _____

who proved to me based on satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within the instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____

My commission expires _____ (Seal)