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P-076 2/18/2016

I do hereby certify that I have read the preceding statement and that it is true to the best of my knowledge and belief.

Signature of Person Making Statement
(To be valid, Notary must witness signing of affidavit)

Signature of Parent or Guardian if Minor
(To be valid, Notary must witness signing affidavit)

STATE OF FLORIDA

Sworn to and subscribed before me this _____ day of _____ 20 _____ by

(Name of person making statement)

Notary Seal:

Notary Public/Officer

Print, Type, or Stamp Name

Personally Known ____ OR Produced ID ____

If Produced ID, type & number _____