



Mary Louise Nicholson, County Clerk

Affidavit of Age and Identity

THE STATE OF _____

COUNTY OF _____

Before me, the undersigned authority, on this day personally appeared _____

_____, known to me to be the person
(name of applicant)

who subscribed their name below, and have verified their date of birth is _____.
(MM/DD/YYYY)

Signature of Applicant

Print Full Legal Name of Affiant as shown on identification provided

Subscribed and sworn to before me on this _____ day of _____, 20_____.

(Signature of Notary Public)

Seal