

AFFIDAVIT/ ACKNOWLEDGEMENT FORM

On _____, 20__ I, _____ being of sound mind and body,
do hereby swear and affirm that _____

I make and sign this statement of my own free will, without coercion and under no duress on this the _____, day of _____, 20__.

(Signature)

Print Name

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me **by means of** **physical presence** or **online notarization**, this _____ day of _____, 20__ (year) by _____ (name of person making the statement). He/she is personally known to me or who has produced _____ (type of identification) as identification.

NOTARY'S SEAL:

NOTARY PUBLIC, STATE OF FLORIDA
(Signature of Notary, Taking Acknowledgement)

(Name of Acknowledger Typed, Printed or Stamped)

Commission Number