GENERAL AFFIDAVIT

STATE OF FLORIDA) _____ (*DEFENDANT*)

_____ (*ADDRESS*)

_____

VS

COUNTY OF PASCO)

BEFORE ME, THE UNDERSIGNED AUTHORITY PERSONALLY APPEARED:

_____OF _____
Affiant Name *Address* *Phone*

Who is personally known to me or who has produced _____as
Type of Identification
identification, affirms the following:

FURTHER AFFIANT SAYETH NOT. _____
Signature of Affiant

AFFIRMED BEFORE ME THIS _____DAY OF _____20_____

_____NOTARY PUBLIC, COMMISSION No. _____

My Commission Expires: _____

Rev 6/09