

**JURAT WITH AFFIANT STATEMENT**



State of \_\_\_\_\_ } ss.  
County of \_\_\_\_\_

- See Attached Document (Notary to cross out lines 1–7 below)
- See Statement Below (Lines 1–7 to be completed only by document signer[s], not Notary)

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
5 \_\_\_\_\_  
6 \_\_\_\_\_

7 \_\_\_\_\_  
*Signature of Document Signer No. 1*                      *Signature of Document Signer No. 2 (if any)*

Subscribed and sworn to (or affirmed) before me

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by  
*Date*                                      *Month*                                      *Year*

\_\_\_\_\_  
*Name of Signer No. 1*

\_\_\_\_\_  
*Name of Signer No. 2 (if any)*

\_\_\_\_\_  
*Signature of Notary Public*

*Place Notary Seal/Stamp Above*

*Any Other Required Information  
(Residence, Expiration Date, etc.)*

**OPTIONAL**

*This section is required for notarizations performed in Arizona but is optional in other states. Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.*

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

