

IN THE \_\_\_\_\_ COURT OF \_\_\_\_\_ COUNTY,

\_\_\_\_\_

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Plaintiff/Petitioner/Movant,

v.

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Defendant/Respondent.

Case No. \_\_\_\_\_

\_\_\_\_\_ Division

**SWORN AFFIDAVIT**

I, \_\_\_\_\_, being first duly sworn, depose and state as follows:

1. My full legal name is \_\_\_\_\_ .

2. My current address is:

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

3. My date of birth is \_\_\_\_\_ .

4. My relationship to this case or the parties involved is:

5. I am making this affidavit in my:

Personal Capacity

Official Capacity

If in an official capacity, my title or position is: \_\_\_\_\_

And I represent the following organization or entity: \_\_\_\_\_

6. My phone number is \_\_\_\_\_ and my email address is

\_\_\_\_\_.

7. I will provide identification information:  Yes  No

If yes, the type of identification is: \_\_\_\_\_

The identification number is: \_\_\_\_\_

## **I. STATEMENT OF FACTS**

8. The facts stated herein are based upon my personal knowledge, unless otherwise indicated.

9. I hereby attest to the following facts and events:

\_\_\_\_\_

10. This affidavit includes opinions or expert conclusions:  Yes  No

If yes, the basis for any opinions or expert conclusions is:

\_\_\_\_\_

11. This affidavit references or attaches exhibits or supporting documents:  Yes  No

If yes, the exhibits or supporting documents are listed and described as follows:

\_\_\_\_\_

12. I wish to include the following additional facts or clarifications:  Yes  No

If yes, these additional facts or clarifications are:

\_\_\_\_\_

## **II. REQUESTED RELIEF (IF APPLICABLE)**

13. This affidavit is being used to request specific relief or action from the court or agency:   
Yes  No

If yes, the relief or action being requested is:

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I declare under penalty of perjury under the laws of the State of \_\_\_\_\_ that the foregoing is true and correct.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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**Signature of Affiant**

**Printed Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**NOTARY ACKNOWLEDGMENT**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, before me, a Notary Public in and for said County and State, personally appeared \_\_\_\_\_, known to me (or satisfactorily proven) to be the person whose name is subscribed to the foregoing instrument, and acknowledged that he/she executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

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**Notary Public**

**Printed Name:** \_\_\_\_\_

**My Commission Expires:** \_\_\_\_\_