## SECTION II

## APPLICANT'S AFFIDAVIT/AFFIRMATION

I,	, of,
	(Address)
being duly sworn, dep	pose and say that I am authorized to make and file this application for registration,
and that I have exami	ned said application and the information contained herein, including the
documents attached h	ereto, and certify that the same is, to the best of my knowledge and belief, true,
. 1 1.	
correct and complete	in all respects.

(Date)	(Name/Title)	
STATE OF	_	
COUNTY OF		
Subscribed and sworn to before me this	day of	, 20

(Seal)

Justice of the Peace/Notary Public