

AFFIDAVIT OF AGE

State:

County:

Affiant: (Name and Address)

Affidavit on oath swears that the following statements are true:

My name is ____ . I am over the age of ____ . I am well acquainted with and know (Names of Persons that are the Subject of the Affidavit) , who own undivided (Kind of Interests) interests in the following lands in ____ County, ____ :

(Description of Lands in which Persons Own Interest)

The birth dates of these persons are as follows:

Name

Birth Date

Affiant

Date:

Form