Affidavit

		Date:		
To the Office of the Cour	ity Clerk			
Dear County Clerk				
l, to release my court reco			authorize the Co	unty Clerk's Office
Index number:				
Defendant/Plaintiff Nam				
Date of Birth:				
Name & Location of Cou	rt:			
(Affiant Signature)				
(Print Affiant Name)				
State of				
County of	,			
On theday of personally appeared				
to me or proved to me of				
(are) subscribed to the w		-		
in his/her/their capacity(or the person upon beha				t, the individual(s),
or the person upon bena		iuails) acieu, executeu	the instrument.	

(Notary signature)