



## Affadavit for Contestants OVER 18 years of Age

DATE \_\_\_\_\_

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

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

### Affidavit of Truthfulness

\_\_\_\_\_, the Contestant making this Application, of full age and  
(Contestant name)

being duly sworn according to law, upon her oath deposes and says:

1. I have read and I understand the provisions of this Application and its attachments. To the best of my knowledge, information and belief, all of the factual statements made in this Application are true.
2. I agree to the terms and conditions of this Application and its attachments.

**I do hereby swear that the statements made in Application are true.**

\_\_\_\_\_  
Contestant's Signature

State of \_\_\_\_\_

County of \_\_\_\_\_

**Sworn and subscribed to before me, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.**

\_\_\_\_\_  
NOTARY PUBLIC Seal