STATE OF VERMONT
WASHINGTON COUNTY, SS

DATE:_____

Barre City Police Department
15 Fourth Street
Barre, Vermont 05641
802-476-6613

ADDRESS:_____
_____
HOME PHONE:_____
WORK PHONE:_____
DOB:_____

AFFIDAVIT

I, _____, hereby swear under penalty of perjury (NMT 15 years, NMT $10,000.00 or both), that I have personal knowledge of the following facts and that this statement is true to the best of my knowledge and belief:

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Subscribed and sworn to before me:

_____
Notary Public

_____
Affiant's Signature

_____
Date