

PASSPORT AFFIDAVIT
(United States Only)

State of Georgia
County of _____

Before me this _____ day of _____, _____ (year), personally appeared _____
(Name of Affiant/Passport Bearer)
who under oath or affirmation makes following statements:

I am the legal bearer United States Passport No. _____, issued on _____ and
(Date of Issuance)
expiring on _____. My date of birth is _____. I hereby authorize a notary
(Date of expiration)
public to issue a certified copy of my passport from the original.

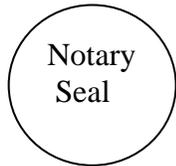
(Signature of Affiant/Passport Bearer)

Sworn to (or affirmed) and subscribed before me this _____ day of _____, _____ (year),
by _____.
(Name of Affiant/Passport Bearer)

_____ **Personally Known**

_____ **Produced Identification**

_____ **Type and # of ID**



Signature of Notary

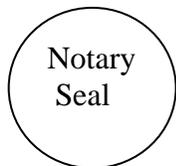
Name of Notary, Typed, Stamped, or Printed

CERTIFICATE OF CERTIFIED COPY

State of Georgia
County of _____

On this _____ day of _____, _____ (year) I certify that the preceding or attached
document is a true, exact, complete, and unaltered photocopy made by me of an original United States
Passport in the name of _____, Passport No _____
issued on _____ and expiring on _____, presented to me by
(Date of Issuance) (Date of Expiration)
the document's custodian _____ and that, to the best of my knowledge,
(Name of Custodian)

this passport is neither a public record nor a publicly recordable document, certified copies of which
are available from an official source other than a notary public.



Signature of Notary

Name of Notary, Typed, Stamped, or Printed