

**Criminal Records Check Affidavit**

I, \_\_\_\_\_ , hereby declare that the attached is the  
(Printed name of affiant/document custodian)

true and complete original of \_\_\_\_\_  
(Subject's name on criminal records check)

criminal records documentation issued by: \_\_\_\_\_  
(Name of law enforcement agency)

\_\_\_\_\_  
(Signature of Affiant) (Date)

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State of Georgia

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

Signed and sworn to (or affirmed) in my presence on \_\_\_\_\_  
(Date)

by \_\_\_\_\_ ,  
(Printed name of present, named signer)

who \_\_\_\_\_ is personally known or \_\_\_\_\_ who produced government-issued photo identification pursuant to O.C.G.A. Sec. 45-17-8(e).

\_\_\_\_\_  
(Signature of Notary Public)  
Notary Public, State of Georgia [Stamp/Seal]

My commission expires: \_\_\_\_\_