CREDIBLE WITNESS AFFIDAVIT (Florida)

State of Florida County of _____

Under the penalties of perjury, I/we, the undersigned credible witness(es), declare that:

1. The person appearing before the notary public whose signature is to be notarized is personally known to me/us as _____ (Printed name of signer);
2. The person named above **is the person** whose signature is to be notarized on the document;
3. I/we reasonably believe that this person does not possess a valid form of identification as described in Florida Statute 117.05(5)(b)2.;
4. I/we reasonably believe that it would be very difficult or impossible for this person to obtain another acceptable form of identification;
5. I/we do not have a financial interest in the transaction and am/are not a party to the document being notarized.

Witness 1: Signature: _____ Date: _____

Printed Name: _____

Complete Address: _____

Witness 2: Signature: _____ Date: _____

Printed Name: _____

Complete Address: _____

Notary Acknowledgment / Jurat

Sworn to (or affirmed) and subscribed before me by means of ☐ physical presence or ☐ online notarization, this _____ day of _____**, 20**, by Witness 1 and Witness 2, who are personally known to me or who have produced the following identification:

Witness 1: _____

Witness 2: _____

Notary Public Signature: _____

Printed Name: _____

Notary Public Commission No.: _____ **My Commission Expires:** _____

(Notary Seal)