

STATE OF SOUTH CAROLINA
COUNTY OF GREENVILLE

PROBATE COURT

IN THE MATTER OF

CASE NUMBER

AFFIDAVIT

The undersigned attorney hereby certifies that the forms to be filed by his/her office from time to time in this matter shall be in compliance with statutory mandates and substantially similar in form, substance, and content to the court approved forms.

SWORN to before me this _____ day of _____, 20____

Notary Public for South Carolina
My commission expires: _____

Signature: _____
Name: _____
Address: _____

Telephone (O): _____
(H) _____

The purpose of this form is to accompany documents generated by a word-processor/computer which are submitted in place of the Court forms in this package.