

Affidavit – Witness

Country: _____

State: _____

County: _____

To Wit: _____

I, _____ of _____

(country, state and county/province) make oath and say as follows:

1) That I have personal knowledge of and/or directly observed the following events:

(attach additional pages if needed);

2) That I am attaching the following additional documents which are incorporated here in by this reference:

;and

3) That I verify that the information provided in this Affidavit is accurate and I understand that the information provided in this Affidavit may be used by the Behavior Analyst Certification Board (“BACB”) in the BACB’s investigations.

PRINTED NAME: _____

SIGNATURE: _____ DATE: _____

This document is signed under the penalty of perjury.

SWORN TO:

this ____ day of _____ 20____ in the presence of _____

NOTARY/COMMISSIONER FOR TAKING AFFIDAVITS