

STATUTORY DECLARATION FOR CHANGE OF APPEARANCE

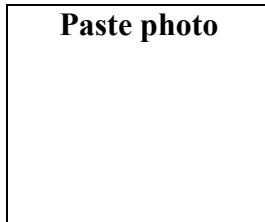
READ INSTRUCTIONS CAREFULLY. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED
(This Affidavit must be signed and attested in presence of a Notary Public)

I, _____

S/o _____

Residing at _____

In the state of _____, do solemnly and sincerely declare that the photograph attached to the Statutory Declaration is the person that I spoke to and viewed his Identification. It is being presented as Signed on Back by Notary Public.



I acknowledge that this declaration is true and correct and I understand that a person making a false declaration is liable to the penalties of perjury.

SIGNATURE OF
PERSON MAKING
DECLARATION

Declared at _____ in the State of
_____ on the _____ day of
_____ of 20__

Before me,
SIGNATURE :
PRINT NAME :
ADDRESS :
STATUS : Notary Public