

**AFFIDAVIT FOR CERTIFICATION of
DOCUMENT COPY
(55 ILCS 5/3-5013)**

STATE OF ILLINOIS }
 } ss.
_____ COUNTY }

I, (print name) _____ being duly sworn, state that I
have access to the copies of the attached document(s) (state type(s) of
document(s)) _____

as executed by (name(s) of party(ies)) _____

My relationship to the document is (ex. – Title Company, agent, attorney)

I state under oath that the original of this document is lost, or not in possession of
the party needing to record the same. To the best of my knowledge the original
document was not intentionally destroyed or in any manner disposed of for the
purpose of introducing a copy thereof in place of the original.

Affiant has personal knowledge that the foregoing statements are true.

Signature

Date

Subscribed and sworn to before me
this _____ day of _____, _____.

Notary Public

SEAL