JUSTICE OF THE PEACE COURT OF THE STATE OF DELAWARE IN AND FOR _____ COUNTY

COUKT NO.	COURT	NO.
-----------	-------	-----

COUR	RT ADDRESS:						
			CIVIL ACTION NO.				
AFFIDAVIT IN SUPPORT OF COMPLIANCE WITH THE CARES ACT							
My na	ame is: First	Middle	Last				
this pa		ng this certification. Th		tion case described at the top of ication are within my personal			
The	Administration, HUD, the Dept. of Veterans Affairs or the USDA; 3) I have attached the first page of every unsatisfied mortgage that is on the property; and						
Date			laintiff's signature				
•		S' T	WORN TO OR AFFIRMEI O BEFORE ME				
			HIS DAY OF	, 20			
		- 1	Notary Public				

My commission expires