THE EMPLOYMENT AGENCY ACT PROVIDES THAT **EACH** APPLICANT LISTED BE ACCOMPANIED BY THE AFFIDAVITS OF AT LEAST **TWO** REPUTABLE RESIDENTS OF THE STATE OF NEVADA.

AFFIDAVIT

STATE OF NEVADA,					
COUNTY OF					
	b	being duly sworn deposes	and says:		
I reside at		in	the city of		
	Number and street				
County of	I have known the	applicant			
The person described in the factorization.	oregoing application for	years last past. I	know said app	licant to be a pe	erson of good moral
		Signature of person making affidavit			
Sworn to before me this	day of	, 20	·		
Signature of Not	ary Public				
Persons who make Affidavits	s are to complete the following of	nuestions: (Please comple	ete in ink or tv	vpewrite.)	
		•		•	
Tvame		rerephone	110		
Home					
AddressNumber, Street, Apt. No.		City		State	Zip Code
Citizen of U.S.? Yes					
I have been a resident of Nev	ada since				
Driver's License No		Expiration Date			
Has witness been arrested (ex	accept minor traffic violations)?	Yes	No 🗌		
If yes, list arrest(s):					
Date	Charge	Location		Dispos	sition