EARLY LEARNING COALITION OF SEMINOLE

Good beginnings last a lifetime

SAME NAME AFFIDAVIT

I _____ swear that _____ and
(Current Name) (Formal Name)

_____ are the same person.
(Current Name)

_____ _____
Signature Date

_____
Print Name

NOTARY

_____ County, Florida

On this _____ day of _____ 20_____, who has produced

_____ or is personally known signed this document.

Notary Signature: _____

Date: _____

Notary Stamp: