

**AFFIDAVIT OF MAILING
THE DEMAND FOR PAYMENT**

Your Name

Street Address

Street Address Line Two

City, State, Zip

STATE OF ARIZONA)
) ss. **AFFIDAVIT OF MAILING**
County of Pima)

I, _____, being first duly sworn, depose and state that I
Name of Person who Mailed Demand for Payment

mailed, by regular first class mail, on the ____ day of _____, 20____, a
Day Month Year

Demand for Payment Notice, Form _____ addressed as follows:
A or B

Check Writer Name

Street Address

Street Address Line Two

City, State, Zip

Dated this ____ day of _____, 20____.
Day Month Year

Signature

(Print Name)

SUBSCRIBED AND SWORN TO before me this ____ day of _____, 20____.

Notary Public

My Commission Expires