## **Llano County Attorney**

## **AFFIDAVIT OF SERVICE**

(PLEASE PRINT ALL BUT SIGNATURE LINE)

This undersigned Affiant, who after being duly sworn by me, makes the following statement under oath:

6	believe that on, (Date notice sent)
	from my business being
(Person who sent notice)	
(Name of business receiving check)	sent a 10 day notice to pay worthless
	by first class mail to the address on
(Check Writer's Name)	by first class mail to the address on
file of	·
(Address notice was sent to)	
	/
Affiant (print name)	Affiant (signature)
STATE OF TEXAS	
COUNTY OF  This instrument was acknowledged before me on	(date) by
	(name of person or acknowledging).
[NOTARY SEAL]	Notary Public
	Printed Name: