



AFFIDAVIT

KINGDOM OF THE NETHERLANDS
 PROVINCE OF NORTH HOLLAND
 CITY OF AMSTERDAM
 CONSULATE GENERAL OF THE
 UNITED STATES OF AMERICA

} SS:

Before me, _____,

Consular Officer of the United States of America in and for the district of Amsterdam,
 the Netherlands, duly commissioned and qualified, personally appeared:

who, being duly sworn, deposes and says as follows:

My full and correct name is _____

IN WITNESS WHEREOF I have hereunto set my hand on _____.

 (Signature)

SUBSCRIBED AND SWORN/AFFIRMED TO before me, the undersigned Consular officer of the
 United States of America at Amsterdam, the Netherlands, on _____.

THE CONSULATE GENERAL ASSUMES NO RESPONSIBILITY FOR THE CONTENTS OF THIS DOCUMENT.