AFFIDAVIT

KNOW ALL PERSONS, that	I,, presently stationed
or residing at	, desiring to execute an
affidavit, do hereby designate	as
temporary custodian(s) of my	child(ren):
	, in the event of my death or
incapacitation. This designati	on will remain valid and be fulfilled until such time as the legal guardian(s)
	is/are notified or appointed by a court
of competent jurisdiction and	appear in person to the aforesaid temporary custodian (s) take custody of the
aforesaid child(ren).	
ACKNOWLEDGED BEFO	RE A NOTARY PUBLIC
STATE OF NEVADA)	
)ss COUNTY OF CLARK)	
, , , , , , , , , , , , , , , , , , ,	
I, a Notary Public, in and for t	he County and State aforesaid, do hereby certify that on this day of
-	before me personally appeared
who signed and executed the	
6	

In Witness Whereof, I have hereunto set my hand and official seal this day and year above.

Notary Public