Affidavit of Nonprofit Designated Requester Form

Complete this form only if you are preparing an Affidavit of Nonprofit on behalf of the nonprofit organization.

=	onal knowledge of the fac	appearing in this arrive	avit.	
2. Please state	e your position within the	nonprofit organization:		
Your name (typ	pe or print):			
Address:				
	Street	City	State	Zip
Phone:		Email:		
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