| State of  |  |
|-----------|--|
| County of |  |

## AFFIDAVIT OF CHARACTER

| (1) | / | whose address is, |
|-----|---|-------------------|
|     |   |                   |

(2) \_\_\_\_\_\_, first being duly sworn, says that he/she has been personally acquainted with

(3)\_\_\_\_\_, for (4)\_\_\_\_years. Concerning the moral character of said person, the affiant further states as follows:

(5)

It is understood that this affidavit will be used in an application to the NC Board of Funeral Service.

(6)\_\_\_\_\_

Sworn to and subscribed before me this the \_\_\_\_\_day of \_\_\_\_\_, 20\_\_\_\_.

SEAL

Notary Public

My Commission Expires

## **INSTRUCTIONS**:

- (1) Name of person giving affidavit (affiant).
- (2) Address of person giving affidavit.
- (3) Name of applicant.
- (4) Must be at least three (3) years.
- (5) Comments on character; how known to affiant, etc.
- (6) Signature of affiant.

## THIS FORM **MUST** BE NOTARIZED.

North Carolina Board of Funeral Service

- 1033 Wade Avenue, Suite 108
- Raleigh, North Carolina 27605