

STATE OF		
COUNTY OF		
	iant, on this day personally appeared before me, and having presented a valid picture I.D. in the fo	
of a Driver's License, and says:	, who after being duly sworn, on penalty of perjury, depo State Identification, Passport, Military Identification	ses
My name is	, and I am the person identified in the picture	I.D
Accou	with American Express National Bank.	
Address of Affiant: _		
Address of Affiant: _ Social Security Num		
Address of Affiant: _ Social Security Num Signature of Affiant:	nber of Affiant:	
Address of Affiant: _ Social Security Num Signature of Affiant:	orn to before me, this, 20, 20	
Address of Affiant: _ Social Security Num Signature of Affiant: Subscribed and swo	orn to before me, this	

PLEASE SUBMIT REQUEST VIA FAX OR MAIL TO ONE OF THE FOLLOWING

Fax: 1-800-542-0779

1: American Express National Bank, PO Box 30384, Salt Lake City, UT 84130-03