## **AFFIDAVIT**

K.S.A. 28-115(j)

(\$125 Filing Fee Cap on indebtedness of less than \$75,000.00 for a single family principal residence)

| STATE OF KANSAS                          | )                           |                                     |            |
|--|-----------------------------|-------------------------------------|------------|
| COUNTY OF                                | ) ss:<br>)                  |                                     |            |
| I,                                       | , of _                      |                                     | do state   |
| that I have personal knowledge of the    | statements and representa   | ations set forth in this Affidavit. |            |
| The mortgage dated                       | , by                        |                                     |            |
| granted to                               |                             | , in the amount of                  | , recorded |
| with the Register of Deeds of Reno Co    | ounty, Kansas regarding t   | he following described real estate: |            |
|  |                             |                                     |            |
|  |                             |                                     |            |
|  |                             |                                     |            |
|  |                             |                                     |            |
| is for a single family residence used as | s a principal residence. Fu | orther affiant saith not.           |            |
| Signed this day of                       | , 20                        |                                     |            |
|  |                             |                                     |            |
|  |                             | Signature                           |            |
|  |                             | Typed or Printed Name               |            |
|  |                             |                                     |            |
| Subscribed and sworn before me this _    | day of                      | , 20 by                             |            |
|  | <u> </u>                    |                                     |            |
|  |                             | Notary Public                       |            |
|  | My Comm                     | nission Expires                     |            |