Translator Affidavit

(Name of language)	language into the (Name of la	language,
and to the best of my know	wledge, the attached document is a	true, accurate and complete
translation of		
(Description of document)		
	Date:	
Signature of translator		
State of Georgia		
State of Georgia County of		
State of Georgia County of		
State of Georgia County of Signed and sworn to (or a	ffirmed) in my presence on(Date)	
State of Georgia County of Signed and sworn to (or a	 ffirmed) in my presence on	
State of Georgia County of Signed and sworn to (or a by (Printed name of present, n	ffirmed) in my presence on(Date) (Date) amed signer)	,
State of Georgia County of Signed and sworn to (or a by (Printed name of present, n who is persona	ffirmed) in my presence on (Date) amed signer) Illy known or who produ	,
State of Georgia County of Signed and sworn to (or a by (Printed name of present, n who is persona	ffirmed) in my presence on (Date) amed signer) Illy known or who produ	,
State of Georgia County of Signed and sworn to (or a by (Printed name of present, n	ffirmed) in my presence on (Date) amed signer) Illy known or who produ	,

Notary Public, State of Georgia [Stamp/Seal]

My commission expires: _____