AFFIDAVIT OF LOSS OR DESTRUCTION OF WALL LICENSE

The address to which it should be sent:		/ /	Birth Date:	/ /
	The address to which it shou	ıld be sent:		
City State Zip	City	State		Zip

AFFIDAVIT

I,______, being duly sworn and according to law, hereby says that my original wall certificate of admission has been _____Lost or ____Destroyed and I no longer have in my possession, my New Jersey Wall Certificate of Admission. I hereby request that you send me a replacement certificate to my address as stated above. The foregoing is true and correct to the best of my knowledge, information and belief.

I have enclosed a **Certified Check** OR a **Money Order** in the amount of \$40 (Made payable to Secretary, Board of Bar Examiners) to cover the cost of the replacement certificate.

Signed:	

Dated:	/	/	

Sworn to and Subscribed:

Before me this day

of

Send to: Board of Bar Examiners P.O. Box 973 Trenton, NJ 08625-0973

Notary Public or Attorney at Law