## AFFIDAVIT OF MAILING



## STATE OF DELAWARE DELAWARE BOARD OF PARDONS

Applicant Name \_\_\_\_\_\_Date of Birth\_\_\_\_\_

The above applicant has filed a petition for a commutation with the Board of Pardons ("Board") in the Secretary of State's Office, 401 Federal Street, Suite 3, Dover, DE 19901. The petition will be heard at the earliest possible date as determined by the Board.		
<ol> <li>Matthew P. Denn, Attorn Wilmington, DE 19801.</li> <li>Chief of Police in the cit</li> </ol>	led at the senter ney General, D y/county where ueen, Superinte E 19903.	peen sent to: ncing hearing(s) or Presiding Judge(s) Department of Justice, Carvel State Building, 820 N. French St., re the arrest(s) was/were made. rendent, Department of Public Safety, Division of State Police,
Signature of Applicant		Date
STATE OF	)	
STATE OF	) SS )	
		he/she is attesting that all statements contained in his/her application are true t suppressed any information that might affect this application.
Sworn to me before me this	day of	20
Signature of Notary Public		
My commission expires		(SEAL)
THE COMPANY AND A STATE OF THE		

**IMPORTANT:** Make sure you have completed every item on the checklist and that your application is signed and complete. Any missing information will significantly delay processing.