SERVICE OKLAHOMA

LOST-STOLEN CREDENTIAL AFFIDAVIT

State of Oklahoma)

)§

County of _____)

The undersigned affiant being first duly sworn upon their oath states and certifies that their credential(s) listed below has been:

☐ Lost ☐ Stolen ☐ Other: _____

CREDENTIAL INFORMATION (Please print or type):			
Last Name:	First Name:	Middle Name:	Social Security Number:
State:	Type/Class:	Credential Number:	Date of Birth:
Issuance:	Expiration:	Restrictions:	Endorsements:

The affiant further declares that they now possess the following credential:			
State:	Type/Class:	Credential Number:	
Current Address:	City:	State:	Zip:

_____

Affiant's Signature

Subscribed and sworn to before me this _____ day of _____ , 20 _____

_____

Service Oklahoma Representative's Signature

Authority Reference: 47 O.S. § 6-106