

**AFFIDAVIT**

STATE OF OHIO                    )  
  ) SS:  
COUNTY OF FRANKLIN        )

I, Mark Landes, hereby swear as follows:

1. Attached as Exhibit A is a true and accurate copy of my military identification card. It indicates my status as a retired reservist. On the front, under the portion that is whitened out on the exhibit, is my social security number.
2. The military identification cards issued to me in the 22 years of service before my retirement also included my social security number.
3. Further, affiant sayeth naught.

  
\_\_\_\_\_  
Mark Landes

Sworn to and subscribed before me, this 30<sup>th</sup> day of October, 2006.




DEBORAH FUNK  
Notary Public, State of Ohio  
My Commission Expires 11/2/08


  
\_\_\_\_\_  
Notary Public



DATE OF BIRTH:	WEIGHT	HEIGHT	HAIR COLOR	EYE COLOR
1956JUN20	180	70	BR	BL



DATE OF ISSUE	MEDICAL
2006MAR13	DIRECT: NO CIVILIAN: NO



DD FORM 2 (RES. RET.) OCT 93 PROPERTY OF US GOVERNMENT

