## MAGISTRATE COURT OF FAYETTE COUNTY, GEORGIA

| Date Filed   | Case Number           |   |
|--|-----------------------|---|
|  |                       |   |
| Plaintiff(s) Name, Address Phone:  |                       |   |
| vs   |                       |   |
| Defendant(s) Name, Address   |                       |   |
| DI   | SPOSSESSORY AFFIDAVIT |   |
| (agent) for Plaintiff(s) herein, and the stated above, in Fayette County, the person(s)/entity(ies) or known occu FURTHER THAT: (check applicable [ ] tenant fails to pay the rent which |                       | the address as<br>re are no other<br>nt relationship. |
| Plaintiff(s) is/are entitled to recover a Plaintiff(s) desires and has demande to deliver said possession.  WHEREFORE, Plaintiff(s) demand( \$   |                       | concluded.<br>ed and refused                          |
| Sworn to and subscribed before me, this day of   |                       | y[]Agent[]  |
| Magistrate or Deputy Clerk   |                       |   |