Affidavit of Software Destruction

I, _____, resident of the State of:_____ County:_____,
(print name)

issue the following sworn Affidavit to Digital Appworks LLC of the State of Georgia, USA ("DAW") in compliance with DAW's refund policy as written on its *Terms and Conditions* page at *https://www.digitalappworks.com/termsandconditions/,* accepted by me at time of order.

Order Number:_____ Order Date:_____ Order Email Address:_____

Software Title:_____ Number of licenses to refund:_____

I do swear and affirm on this _____ day of _____, _____, that all of the following statements are true:

1. I am the licensee of record for the DAW software title written above ("the Software").
2. I have destroyed all copies of the Software installer file on all computers and devices I have saved it on since purchase.
3. I have destroyed all Software installation folders and files on all computers and devices I have installed it on since purchase.
4. I am not currently using this licensed Software, nor will use this licensed Software at any time in the future.
5. I understand that all refund requests must be made within the first 30 calendar days from purchase.
6. Please mail the clear and readable <u>notarized</u> affidavit to DAW:
    o   **Digital Appworks LLC, 3270 Walton Riverwood Ln #1007, Atlanta GA 30339**
7. Please accompany this affidavit with a written notification to DAW of the preferred refund option: (1) full or partial refund to the same payment method I chose during purchase, or (2) full or partial refund by issue of a DAW company check

I SWEAR OR AFFIRM THAT THE ABOVE AND FOREGOING REPRESENTATIONS ARE TRUE AND CORRECT TO THE BEST OF MY INFORMATION, KNOWLEDGE, AND BELIEF.

_____
Affiant signature

Notary seal	On this _____ day of _____, _____, before me, affiant _____ personally appeared, and known to me (or satisfactorily proven) to be the person whose name is described in this Affidavit, and being first duly sworn on oath according to law, deposes and says that he/she has read the foregoing Affidavit subscribed by him/her, and that the matters stated herein are true to the best of his/her knowledge and belief. In witness whereof I hereunto set my hand and official seal: _____ Notary Public Signature _____ Title (and rank) My commission expires: _____

Notary name and address (please print):

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