

IN THE CHANCERY COURT OF _____ COUNTY, MISSISSIPPI
_____ JUDICIAL DISTRICT

IN RE: _____

CAUSE NO. _____

UNIFORM ALCOHOL & DRUG COMMITMENT AFFIDAVIT UNDER MCA SECTION 41-31-3

COMES NOW _____, relative and/or interested person, residing at _____, telephone number _____, duly sworn and deposed, says the following to be true and correct to the best of my knowledge and belief:

_____ is a person, I allege to be an alcoholic or drug addict, is a resident of this state, and because of his/her alcoholism or drug addiction:

- ___ Is incapable of or unfit to look after and conduct his/her affairs; OR
- ___ Is dangerous to him/herself or others; OR
- ___ Has lost the power of self-control because of periodic, constant or frequent use of alcoholic beverages or habit-forming drugs; AND

That he/she is in need of care and treatment and this his/her detention, care and treatment at an institution will improve his/her health. Their nearest relative, if known, is _____ who resides at _____, telephone number _____.

Factual descriptions of recent behavior, witnesses, and where and when it occurred, if known:

(attach additional pages if needed)

SWORN TO AND SIGNED BY MY HAND this the ___ day of _____, 20__ A.D.

AFFIANT (relative and/or interested person)

SWORN TO AND SUBSCRIBED BEFORE ME this the ___ day of _____, 20__ A.D.

NOTARY PUBLIC

August 1, 2019