

State of _____

AFFIDAVIT OF RESIDENCE

State of _____

County of _____

I, the undersigned, being duly sworn, hereby affirm that:

1. My name is _____. My date of birth is _____.

2. My social security number is: _____

3. I currently reside at the following address: _____, _____, County of _____,
_____.

4. I have been a resident at this address for: (Check one)

_____ months

_____ years

5. The following people can attest to my residency at this location:

Name: _____

Relationship to me: _____

Name: _____

Relationship to me: _____

Name: _____

Relationship to me: _____

6. Additional information: _____.

Signature

Printed Name



