

State of _____

AFFIDAVIT OF RESIDENCY

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



NOTARY ACKNOWLEDGMENT

State of _____)
) **(Seal)**
County of _____)

The foregoing instrument was acknowledged before me this _____ day of _____,
20____, by the undersigned, _____, who is personally known to me or satisfactorily proven to me
to be the person whose name is subscribed to the within instrument.

Signature

Notary Public

My Commission Expires: _____

