## **AFFIDAVIT OF RESIDENCE**

Name:	
Address: City, State, ZIP:	
Date:	-
To Whom This May Concern,	
·	
I,, formally a	acknowledge living at the street address of
I have attached the following documents for	
Furthermore, I swear and affirm under pena are true and accurate.	Ity of perjury that the facts set forth in this statement
Sincerely,	
Witness /	Acknowledgment
I/We, as witness(es) to the aforementioned acknowledge their residency status.	claims made by and
Witness Signature: Print Name	Date:
Witness Signature: Print Name:	
Notary A	Acknowledgment
A Notary Public or other officer completing this certi	ficate verifies only the identity of the individual who signed the not the truthfulness, accuracy, or validity of that document.
State of	
County of	
On, before me, who proved to me on	, Notary Public, personally appeared the basic of satisfactory evidence to be the
that he/she/they executed the same in his/h	to the within instrument and acknowledged to me er/their authorized capacity(ies), and that by the person(s), or the entity upon behalf of which the
I certify under PENALTY OF PERJURY und that the foregoing paragraph is true and cor	ler the laws of in the State of rect.
	WITNESS my hand and official seal.
Place Notary Seal Above	Signature Print Name: