

# Family Household Affidavit

Date:

I, , of legal age, residing at , hereby declare under oath that the following persons are living in my household:

No.	Name	Relationship	Age
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>

I certify that the information above is true and correct to the best of my knowledge and belief.

Affiant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Notary Public: \_\_\_\_\_