

Joint Sponsor's Affidavit of Support

Joint Sponsor's Information

Full Name:

Address:

Phone Number:

Social Security Number:

Sponsored Immigrant Information

Full Name:

Relationship to Sponsor:

Financial Information

Current Annual Income:

Number of Dependents:

Declaration

I certify under penalty of perjury that the information provided above is true and correct to the best of my knowledge.

Signature of Joint Sponsor:

Date: