



SCHOOL AFFIDAVIT OF RESIDENCE

Name of SSTC Member _____

Street Address _____

City, State _____

Zip _____

Date _____

To Whom This May Concern,

I, _____, hereby attest and claim the individual known as _____ resides at the street address of _____, city of _____, state of _____. They are currently enrolled at (name of school) _____, city of _____, state of _____ for the 2022-2023 school year. Furthermore, I swear and affirm under penalty of perjury that the facts set forth in this statement are true and accurate.

Sincerely,