

AFFIDAVIT

Date: [DATE]

Place: [CITY, STATE]

BETWEEN:

1. [FULL NAME], aged [AGE] years, [SON/DAUGHTER/WIFE] of [FATHER'S/HUSBAND'S NAME], residing at [COMPLETE ADDRESS] (hereinafter referred to as the 'Deponent')

I, [FULL NAME], the above-named Deponent, do hereby solemnly affirm and state on oath as follows:

1.

That I am [NATIONALITY] citizen and a permanent resident of [ADDRESS].

2.

That [STATE THE FACTS - PARAGRAPH 1].

3.

That [STATE THE FACTS - PARAGRAPH 2].

4.

That [STATE THE FACTS - PARAGRAPH 3].

5.

That [STATE ANY ADDITIONAL FACTS AS REQUIRED].

VERIFICATION

I, the above-named Deponent, do hereby verify and confirm that the contents of this Affidavit are true and correct to the best of my knowledge and belief, and nothing material has been concealed therefrom.

IN WITNESS WHEREOF, the parties have executed this agreement on the date first written above.

Signature of Deponent

Name: [FULL NAME]

Date: [DATE]