



Affidavit of Identity

Full Name

Date of Birth

Mailing Address: Street Address

Social Security Number

Mailing Address: City, State, Zip Code

Home Phone

Physical Address: Street Address

Cell Phone

Physical Address: City, State, Zip Code

Work Phone

By signing this affidavit, I swear that the information above is true.

Signature

Notary: Obtain one of the following and provide the information below.

☐ US or Canadian Driver's License

☐ US or Canadian ID Card

☐ Passport

☐ Alien Registration Card

☐ Military ID Card

State Issued

Country Issued

Date Issued

ID Number

Expiration Date

State of

County of

SS

Subscribed and sworn to before me, in my presence, this ____ day of _____,
20____.

Notary Public

My Commission Expires (date)