



AFFIDAVIT OF RESIDENTIAL ADDRESS & PROOF OF INCOME

Please complete in **BLOCK** letters appropriately.

I (please print name)		of ID/Passport	No	Please	e insert C)mang/Pas	ssport No.			
Do hereby solemly affirm and declare as follow	vs:									
(a) That I reside at;										
Physical Address										
City/Town/Village										
Street/Ward Name		Plot/House No.								
(b) That I make/earn a Gross monthly income	of:									
Income										
Gross Monthly Income										
Source of Income										
Name of Employer (if income earned from employment)	Name of Employer]
Name of Business & Nature of Business (if income earned from Business)	Name of busines	s Natur	re of Bus	iness/ D	escription	n of Busine	ess Activitie	S]
Any other Source of Income	Please specify]	
I further certify that the above information is t I can be held accountable and penalized in a c		ere, I understand that if a	ny of t	he inf	format	ion con	itained i	n this	letter is	false,
	Deponent									

THUS SIGNED AND SWORN TO BEFORE ME AT GABORONE ON THIS _____DAY OF ______20____, THE DEPONENT HAVING ACKNOWLEDGED THAT HE/SHE KNOWS AND UNDERSTANDS THE CONTENTS OF THIS AFFIDAVIT AND BELIEVES THEM TO BE TRUE AND CORRECT, AND HAS NO OBJECTION TO TAKING THE PRESCRIBED OATH AND CONSIDERS SAME TO BE BINDING ON HIS CONSCIENCE.

 Official Stamp	

Commissioner of Oaths