

# Affidavit of Support

State of

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County of

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I, \_\_\_\_\_, of legal age, residing at

\_\_\_\_\_, in the State of \_\_\_\_\_, do hereby  
solemnly affirm and declare that I am willing and able to support

\_\_\_\_\_ residing at \_\_\_\_\_  
for the duration of their stay in the United States.

**Relationship to Applicant:**

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I understand that this affidavit is made for the purpose of assuring the U.S. government that the above-named applicant will not become a public charge while in the United States.

**Employment/Occupation:**

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**Annual Income:**

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**Number of Dependents:**

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I certify under penalty of perjury that the foregoing is true and correct.

**Signature**

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**Date**

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**Printed Name**

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**Contact Number**

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