STATE OF SOUTH CAROLINA ) AFFIDAVIT OF

) RESIDENCE

COUNTY OF GREENVILLE )

PERSONALLY appeared before me ,

Primary Resident

Residing at ,

Street Address City Zip Code

Who does solemnly swear that ?

(Parent/Guardian)

 ,

(Children)

Are lawfully residing with me at my resident address stated above.

I understand that if it is found that I have willfully and knowingly sworn to false information in this affidavit, that pursuant to Section 16-9-30 of the South Carolina Code of Laws, I may be found guilty of a felony and, upon conviction must be fined at the discretion of the court or imprisoned for not more than five years, or both.

(Signature)

Sworn to before me this

 Day of , 20

 (L.S.)

Notary Public for South Carolina

My Commission Expires: