

Notary Public Signature

Residency Affidavit

This affidavit MUST be signed in the prese	•	•
letter from a landlord or property owner w notarized statement.	hich confirms that the child reside	es at the address shown in the
I,		that I do not currently possess any
supporting documentation that establishes my accurately identifies my children who reside v	•	
Children's Names Date of Birth		
My Address:	City	Florida, Zip
My telephone number is		
Print Name:	Signature	
Filitivanie.	Signature.	_
STATE OF FLORIDA	NOTARY PUBLIC	
COUNTY OF BREVARD Sworn to or affirmed and signed before m	20.00	STAMP
Sworn to or animied and signed before in	Date .	
o ID provided		
OR o Personally known by m	ID number ne.	

EARLY LEARNING COALITION of Brevard County, Inc.
Rockledge Office PO Box 560692, Rockledge, FL 32956 Phone: 321-637-1800 Fax: 321-637-1897
Melbourne Office 2671 W Eau Gallie Blvd. Ste 102, FL 32935 Phone: 321-637-1800 Fax: 321-752-3294