Before,

Advocate

The Notary Public/Executive Magistrate (AFFIDAVIT)				
Resident of		P.O		
P.Ssolemnly affirm and c				do hereby
(1) That my permaner		_		
Ward NoC	ircle No	Holding No	Distric	t
(2) That I require a re	sidential certi	ificate.		
That the conte and belief.	ents of this aff	fidavit are true and co	orrect to the best	t of my knowledge
				Deponent
I, identify the deponer signed in my presence				