## PROOF OF RESIDENCY LETTER

To be completed by property owner/renter for residents who live with property owner

DATE: \_\_\_\_\_

To Whom It May Concern:

I, \_\_\_\_\_\_, declare under penalty of perjury under the laws of the State of California as follows:

This letter serves as verification that I, \_\_\_\_\_\_, reside at the property located at: \_\_\_\_\_\_, as listed on the attached utility bill from \_\_\_\_\_\_.

I declare that the following individual(s) live at the above mentioned address and give permission to San Diego Youth Football and Cheer (SDYFC) to verify said information:

a)	 
b)	
c	

Those listed above have resided with me at my home approximately since \_\_\_\_\_\_ to present.

If you have any further questions, please contact me at: Home:

Property Owner

Parent of Participant

Notary to stamp in box below, sign attached Notary Acknowledgement and attach Original Utility Bill as one packet.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT			
A notary public or other officer completing this certificat verifies only the identity of the individual who signed the document to which this certificate is attached, and not truthfulness, accuracy, or validity of that document.	ne l		
	File No:		
STATE OF California	_)SS APN No:		
On before me,	, Notary Public, personally appeared		
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.			
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.			
WITNESS my hand and official seal.			
Signature	_		
	This area for official notarial seal.		
OPTIONAL SECTION - NOT PART OF NOTARY ACKNOWLEDGEMENT CAPACITY CLAIMED BY SIGNER			
Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the			
documents.			
INDIVIDUAL CORPORATE OFFICER(S) TITLE(S)			
PARTNER(S) LIMITED	GENERAL		
ATTORNEY-IN-FACT			
TRUSTEE(S)			
GUARDIAN/CONSERVATOR			
OTHER			
SIGNER IS REPRESENTING:			
Name of Person or Entity	Name of Person or Entity		
<b>OPTIONAL SECTION - NOT PART OF NOTARY ACKNOWLEDGEMENT</b> Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.			
THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED BELOW			
TITLE OR TYPE OF DOCUMENT:			
NUMBER OF PAGES DATE	OF DOCUMENT		
SIGNER(S) OTHER THAN NAMED ABOVE			
	Reproduced by First American Title Company 11/2007		