AFFIDAVIT OF GIFT (CASH/INCOME)

STATE OF) WNOW ALL MI	KNOW ALL MEN BY THESE PRESENTS:	
COUNTY OF) KNOW ALL ME	EN BY THESE PRESENTS:	
My name is	I am ov	over 21 years of age, of sound mind, capab	
of making this Affidavit, ar	nd have personal knowledge	ge of the facts stated herein.	
I hereby make the fo	ollowing gift of funds, as fo	follows:	
□ A lump sum of \$	U.S. Dollars.		
☐ A gift of income in the a	mount of \$	U.S. Dollars, to be paid	
(monthly/quarterly/yearly/o	other) for a period of	(days/months/years).	
This affidavit is ma	ade to document my inten	nt that the funds mentioned above are an	
shall be considered a gift(s)).		
Dated:			
	(si	signature)	
	(p	printed name)	

