**Affidavit of Support Family Member**

**A. Supporting Member Details**

* **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Residential Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Relation to Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Occupational Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Annual Income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Contact Info: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**B. Family Member Details**

* **Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Passport Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Country of Residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Purpose of Visit/Stay: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**C. Support Pledge**

I, \_\_\_\_\_\_\_\_\_\_\_\_ [Name of Supporting Member], hereby pledge my full financial support to \_\_\_\_\_\_\_\_\_\_\_\_ [Name of Applicant], ensuring their well-being and preventing them from becoming a public charge while in the United States.

**Documents Provided for Evidence:**

* **Financial Bank Statements**
* **Salary Slips**
* **Ownership Certificates**
* **Other Supporting Documents: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**D. Signature of Support**

* **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**