



## **Affidavit for Joint Bank Account Holder(s)**

I, \_\_\_\_\_, do not contribute any monies into the bank account of my  
\_\_\_\_\_. My name is on his/her bank  
(Relationship) (Name of Participant)  
a convenience for my \_\_\_\_\_ should he/she not be able to conduct/fulfill any  
(Relationship)  
necessary financial transactions/obligations.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**This statement must be notarized and returned to the Gainesville Housing Authority before certification/re-certification can be completed.**

**State of Florida, County of \_\_\_\_\_**

Under penalties of perjury I hereby declare that the above information is true and correct to the best of my knowledge and belief.

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by  
\_\_\_\_\_  
(Name of Affiant) who is personally known to me or who has produced  
\_\_\_\_\_ as identification and who did /did not (**circle one**)  
take an oath.

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Notary Seal