

CERTIFICATE OF LEGAL RESIDENCE

(Domicile)

This certificate must be filed by person claiming exemption from taxation in the state of Virginia under the Soldiers' and Sailors' Civil Relief Act.

Name: _____

SSN: _____ Rank: _____

Branch of Service: _____

Legal Address: _____

City and State: _____ Zip Code: _____

My Home of Record when entering the Military: _____

State: _____ **(Attach current LES)**

CHANGING HOME OF RECORD/LEGAL RESIDENT

I changed my domicile/legal residence to the state of: _____

Month, Day and Year of change: _____ / _____ / _____

My state income tax is paid to the State of: _____

I am a registered voter in that state: Yes or No

I have not registered to vote at any other place. Yes or No

Signature

The foregoing instrument was acknowledged before me this _____ day of _____.

Signature of Officer Administering Oath: _____

Please mail to: Montgomery County Commissioner of the Revenue
Helen P Royal
755 Roanoke St. Suite 1A
Christiansburg, VA 24073

or Fax to: 540-381-6838