

GIFT INCOME VERIFICATION

Send this form to any person or organization providing ongoing cash contributions to a tenant/applicant or for any ongoing contributions made on behalf of a tenant/applicant such as rent payments, utility bills, etc.

Applicant/Tenant: _____ **Unit #:** _____

Name and Address of Contributor:

Name: _____ **Relationship:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

I, _____, am contributing the following assistance to the above named individual.

List all monetary and non-monetary amounts and frequency (i.e. monthly, weekly, etc.):

Cash: \$ _____ Frequency: _____

Rent Payment: \$ _____ Frequency: _____

Utility Payment: \$ _____ Frequency: _____

Cable/Cell Phone/Internet: \$ _____ Frequency: _____

Transportation: \$ _____ Frequency: _____

Clothing: \$ _____ Frequency: _____

Alcohol, tobacco, etc. \$ _____ Frequency: _____

Diapers/Items for Children: \$ _____ Frequency: _____

Cash for Child Care: \$ _____ Frequency: _____

Other: \$ _____ Frequency: _____

Will this assistance change in the next 12 months? YES NO

If YES please describe: _____

NOTE: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand that providing false representation herein constitutes an act of fraud.

(Signature of Contributor)

Date

