

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. No portion of this form should be completed by tenant or management. Use N/A if not applicable. **Do not leave any blanks.***

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.). (In-Kind Donations are excluded. (i.e. food bank, church, etc.))

Cash:	\$	Frequency:	
Rent Payment:	\$	Frequency:	
Utility Payment:	\$	Frequency:	
Cable/Cell Phone/Internet:	\$	Frequency:	
Transportation:	\$	Frequency:	
Cash for food:	\$	Frequency:	
Clothing:	\$	Frequency:	
Alcohol, tobacco, etc.	\$	Frequency:	
Diapers/Items for Children:	\$	Frequency:	
Cash for Child Care:	\$	Frequency:	
Other:	\$	Frequency:	
Other:	\$	Frequency:	

Will this assistance change or end 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

