

CHILD (or SPOUSAL) SUPPORT CERTIFICATION

Please check the statement(s) below that applies to each child in your household. Indicate which child(ren) the statement applies or indicate 'self' if the statement applies to you with regards to spousal support.

1. **Not entitled:** I am not entitled to receive support or other compensation pursuant to any court order or non-court ordered private agreement. I am not in the process of seeking any monies for support and do not anticipate doing so within the next 12 months.

The child(ren) for whom this statement applies _____

2. **Entitled and receiving:** I am entitled to receive support or other compensation pursuant to a court order (or non-court ordered private agreement) in the amount of \$ _____ per (week/bi-week/month). Provide the name of the court where the order is filed or name and address of the person paying non-ordered support: _____

The child(ren) for whom this statement applies _____

- 3a. **Entitled but not receiving:** I have a court order for receipt of support in the amount of \$ _____ per (week/bi-week/month). (Attach supporting documents or provide name of county and case number where filed.)

However, I do not expect to receive the full amount of money due me because (explain):

I expect to receive no more than \$ _____ over the next 12 months.

- 3b. I hereby certify that I have taken all reasonable legal actions to collect amounts due, including filing with the appropriate courts or agencies responsible for enforcing payment.

The child(ren) for whom this statement applies _____

4. **Will be seeking in the future:** Although I am not currently entitled to receive child support, spousal support or other compensation pursuant to any court order, I believe that I will receive such an order within the next 12 months. I expect to receive \$ _____ per (week/bi-week/month) commencing on _____ 20____.

The child(ren) for whom this statement applies _____

Under penalties of perjury, I hereby certify that the information provided above is accurate and complete as of this date. I consent to release such information in order to comply with government regulations regarding allocation of affordable housing under the LIHTC program - Section 42 of the Internal Revenue Code. I understand that providing false or misleading information under oath may subject me to criminal penalties. I fully understand the information requested and that any misrepresentation will be considered a material breach of the lease agreement and subject me to penalties including but not limited to immediate termination of lease.

Signature of Applicant/Resident

Date

Printed Name of Applicant/Resident



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.