

Certification of Assets

To _____:
Property Name

I do hereby certify that I do or do not hold the following assets:

- 1. Checking Account _____ Yes _____ No
- 2. Electronic Banking Transaction (EBT) Card
 - a) Food Stamps _____ Yes _____ No
 - b) SSA / SSI / Pension _____ Yes _____ No
 - c) Payroll _____ Yes _____ No
 - d) Public Assistance / Child Support _____ Yes _____ No
- 3. Savings Account _____ Yes _____ No
- 4. Christmas Club _____ Yes _____ No
- 5. Certificate of Deposit _____ Yes _____ No
- 6. Real Estate _____ Yes _____ No
- 7. Stocks or Bonds _____ Yes _____ No
- 8. Disposed of Assets for less than Fair
Market Value (within the last 2 years) _____ Yes _____ No
- 9. Any Other Assets _____ Yes _____ No

Note to Manager: All "Yes" answers must be verified by third party verification.

I sign, declare and certify under penalty of perjury and with full knowledge of the repercussions of willful falsification and false swearing under my State's law that the preceding information is correct to the best of my knowledge and agree to notify the site office annually of any changes.

Payer's Signature: _____
Printed Name: _____

Date: _____
Phone Number: _____