

**Mississippi Regional Housing Authority II**  
**P. O. Box 1887**  
**Oxford, MS 38655**

**CHILD CARE EXPENSE**

\_\_\_\_\_  
DATE

**WARNING:**

"Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the \*\*Social Security Act at 208 (a) (6),(7) and (8). Violation of these provisions are cited as violations of 42 U.S.C. 408 (a) (6), (7) and (8).\*\*"

I hereby consent to the release of information requested and provided above.  Signature of Applicant/Tenant _____	Date _____
---	------------

I am paid at the rate of \$ _____ per hour( ) / week( ) / month( ) during the <u>school</u> year to keep the children after school.
-OR-
I am paid at the rate of \$ _____ per hour( ) / week( ) / month( ) for children not yet in school or during <u>school vacations</u> .

The payment amount listed above is paid to me for providing child care for the child/children of \_\_\_\_\_

\_\_\_\_\_ and the names of the children for whom I provide child care are:

Child's name	Child's name	Child's name
Child's name	Child's name	Child's name
Firm Name (if applicable)		
Signed	Date	
Address	Telephone	