

MISSISSIPPI REGIONAL HOUSING AUTHORITY II

P.O. Box 1887
Oxford, MS 38655

AFFIDAVIT FOR CASH OR OTHER SUPPORT

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).

AFFIDAVIT

For cash money received: I, _____ do
(person who receives cash)

hereby swear or affirm that I receive the sum of \$ _____

per [] week [] month from _____
(person who provides cash)

for support purposes such as household utilities, groceries, and/or clothes
purchases, payment of bills on behalf of myself or his/her/my children, etc.

Provider's Address

Provider's Telephone Number

-- AND/OR --

I, _____ do hereby swear
(person receiving benefits)

or affirm that I receive the following benefits from another individual not living in my
home, the value of which I would estimate to be:

\$ _____ per [] week [] month from:

(Provider)

(Address)

(Telephone)

List of Benefits Provided: (child support, utilities, groceries, etc.)

Signature of Affiant

Date of Affiant Signature