SAMPLE RENT/MORTGAGE DOCUMENTATION (Copy onto agency letterhead or insert LRO name and address here)

This form must be completed in its entirety by the Local Recipient Organization (LRO) providing service, as all information is required, for each rent/mortgage payment made with Emergency Food and Shelter Program funds. This form must be signed and dated by the landlord or property manager. Failure to provide complete, required information will result in a compliance exception.			
<u>Client Information:</u>			
Client Name:			
Client Address:			
(complete street address)			
(city/state/zip)			
Type of Assistance:	Rent	Mortgage	
	□Past due rent	□Past due mortgage	
	\Box Current month's rent	\Box Current month's mort	gage
	\Box First month's rent (effect	ive/move in date) (month/date/year)
The monthly (one month) rent/mortgage payment: \$			
The total amount owed by the client: \$			
The amount being paid is for the month(s) of (month/year)		Due Date (month/date/year)	Amount
			\$
			\$
			\$
The total amount being paid by this agency:			\$
Beginning in Phase 39, LROs may pay up to 90 days (3 months) for clients per phase if it is necessary to maintain housing. Current month's rent may be paid up to 10 calendar days before the due date, and past due amounts must be outstanding at the time of payment. First month's rent may be paid up to 30 days prior to move-in date. No deposits, escrow fees, late fees, etc. are eligible when providing assistance to individuals/ households. First month's mortgages are not allowed.			
LRO Verification (To be completed by the LRO staff):			
LRO Staff Name:			
LRO Staff Signature: Date:			
Landlord/Mortgage Holder Verification (To be completed by the landlord/mortgage holder):			
This is to confirm that the above information is accurate, and payment made by this agency will guarantee residency for an additional 30 days.			
Landlord/Mortgage Holder Name: Phone:			
Address:			
(street/city/state)			
Landlord/Mortgage Holder Signature: Date: Date:			