Federal laws and regulations require the Caddo Nation Division of Housing to verify income of household members who participate or wish to participate in housing programs operated by the Caddo Housing Authority. This form must be completed for each household member 18 years of age and older. Please complete all sections and sign this form.

To be completed by household members 18 years of age and older, who do not receive income.

I, _________________________ swear under penalty of perjury that I do not earn or receive income from any source, including the following:

___Y ___N Income from employment, commissions, or stipends.
___Y ___N Income from odd jobs (yard work, maintenance, babysitting, etc.)
___Y ___N Regular income from relatives or friends (monthly, quarterly, annually, etc.)
___Y ___N Social Security Retirement, Disability, or Survivors benefits.
___Y ___N Supplemental Security Income, Disability or Aged
___Y ___N Scholarships, grants, or work study.

________________________________________   ________________
Signature of Household Member                  Date