This form is for any adult member of the household that claims they do not receive any source of earned income.		
· · · · · · · · · · · · · · · · · · ·	, hereby certify to the Cheyenne Housing ring any source of earned income. I therefore grant rity to contact necessary agencies to verify such	
I understand that by signing below, I am certifying	ng that I am not receiving earned income at this time.	
Household Member Signature	Date	
I understand that by signing below, I am certife earned income at this time.	ying that the above named person is not receiving	
Head of Household Signature	Date	

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, the PHA and any owner (or anyone of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses 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 willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more that \$5000. 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 provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 208(f), (g) and (h). Violations of these provisions are cited as violations of 42 U.S.C. 408 f, g, and h.

HOUSEHOLD BUDGET

This Household Budget is used to get an understanding of how expenses are paid for by individuals/households that claim they have less than \$150.00 a month in income. This form is to be completed by any individual/household that claims they have less than \$150.00 a month in income. Please complete the information below.

For Applicants:
What is the average monthly cost for housing and utilities? \$
How does the applicant pay the cost of shelter?
If someone other than a member of the applicant household contributes to housing or utility costs, who contributes?
What is the average monthly contribution to shelter (housing plus utilities)? \$
Will the person(s) contributing toward shelter continue to do so when the applicant is admitted to housing assistance?
If no, why not?
For Participants/Tenants:
What is the average monthly cost for housing and utilities? \$
How does the tenant pay the cost of shelter?
If someone other than a member of the tenant household makes a contribution toward the shelter cost, who contributes?
What is the average monthly contribution to shelter (housing plus utilities)? \$
2. Transportation Expenses
Does the family own a car?
If yes, are there still payments due on the car?
What is the amount of the monthly car, gas, and insurance payments? \$
How does the family make the car, gas, and insurance payments?
If someone other than a member of the applicant/tenant household contributes to the car, gas, and insurance
payments, who contributes?
What is the monthly amount of contribution toward the car, gas, and insurance payments? \$

3. Food Expenses

1. Shelter Expenses

What is the family's weekly grocery bill? \$		
How does the family pay the weekly grocery bill? If someone other than a member of the applicant/tenant family contributes to groceries, who contributes?		
What is the average weekly amount for groceries contributed from all sources? \$		
4. Communications Expenses		
Does the family have a telephone/cell phone? Does the family have any special telephone services? (call waiting, call forwarding, caller ID, etc.) Does the family have an Internet connection? What is the average monthly cost for telephone/cell phone/Internet services? \$ How does the family pay for the cost of telephone/cell phone/Internet services? If someone other than a member of the applicant/tenant household contributes to the cost of telephone/cell phone/Internet service, who contributes? What is the average monthly contribution (in cash or direct payment) for telephone/cell phone/Internet service? \$		
5. Entertainment Expenses		
Does the family have a cable TV/Satellite connection? If yes, does the family have the basic minimum service or do they also have premium channels? What is the average monthly cost of cable TV/Satellite service? \$ How does the family pay for the cable TV/Satellite service If someone other than a member of the applicant/tenant family contributes to the cost of cable TV/Satellite service, who contributes? What is the average monthly contribution (including direct payment to the cable company) for cable TV/Satellite? \$		
6. Clothing Expenses		
What is the average monthly cost for clothing and shoes for the family? \$ How does the family pay for clothing and shoes? If someone other than a member of the applicant/tenant family contributes to the cost of clothing, who contributes?		
What is the average monthly contribution (in cash or new clothes and shoes) for clothing? \$		
7. Smoking Expenses		
Does anyone in the applicant/tenant household smoke cigarettes or cigars? If yes, how many packs per day, are smoke by the smokers in the household? How does the family pay for the cost of cigarettes/cigars? If someone other than a member of the applicant/tenant household contributes to the cost of smoking, who contributes? What is the average monthly contribution (in cash, cigarettes, or cigars)? \$ 8. Pet Expenses		

Does anyone in the household own a pet?		
If yes, how does the applicant/tenant pay for supplies/food for the pet?		
What is the average monthly contribution (in cash, pet s	supplies, pet food) for the pet? \$	
	ort from a friend, family member, or any other source to nt be provided from the source stating how much and	
may be grounds for termination of my housing assista authorize the Cheyenne Housing Authority to use this inf further attest that I will report any changes in income or h recognize that failure to report these changes in a timely	rrect. I further understand that providing false information ance. I am voluntarily submitting this information and I formation as necessary relative to my housing assistance. I household composition within ten days of the occurrence. I manner may result in repayment to the Cheyenne Housing behalf, and may constitute grounds for termination of my	
Head of Household	Date	
Other Adult	Date	
Other Adult	Date	
Other Adult		