## HOUSEHOLD INCOME CERTIFICATION TABLE - ALL FIELDS ARE REQUIRED

Please attach one of the following forms of income verification for every working adult 18 years of age and older:

- Most current year’s tax return, or
- **TWO** most recent & consecutive pay stubs, or
- A copy of another current document verifying income (i.e. Social Security letter, benefit letter, etc.)

If you require additional space, please use the back of this page or make a copy of the table.

### HOUSEHOLD MEMBERS

List all persons who live in this unit

<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Relationship to Head of Household</th>
<th>Age</th>
<th>Disability Yes/No (optional)</th>
<th>Monthly Income</th>
<th>Annual Income from Assets</th>
<th>Source of Income*</th>
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</thead>
<tbody>
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</table>

*Source of Income*: Individuals who do not work or who are paid “under the table,” please also fill out the self-certification form provided. This will serve as your form of paystub.

By signing below, I certify under penalty of law that the information contained in this document is true, accurate and complete to the best of my knowledge. I understand that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for known violations.

Print Name of Head of Household

________________________________________________________________________________________

Signature

________________________________________________________________________________________

Date

________________________________________________________________________________________
Help ensure we are meeting our goal to serve all people
These OPTIONAL questions will not affect your eligibility for housing in any way. Your individual answers are confidential and used only for statistical purposes.

Which best describes your ethnicity? (Select one)
- Hispanic/Latino
- Not Hispanic/Latino

Which best describes your race? (Select one)
- American Indian/Alaskan Native
- Asian
- Black/African American
- White
- Native Hawaiian/Other Pacific Islander
- American Indian/Alaskan Native and Black/African American
- American Indian/Alaskan Native and White
- Asian and White
- Black/African American and White
- Other/Multiracial

What is your gender? (Check one that best describes your current gender identity)
- Female
- Male
- Genderqueer/Gender Non-binary
- Trans Female
- Trans Male
- Not Listed-please specify: _________________

How do you describe your sexual orientation or sexual identity? (Check one)
- Bisexual
- Gay/Lesbian/Same-Gender Loving
- Straight/Heterosexual
- Not Listed-please specify: _________________