



MONROE COUNTY

HOUSING AUTHORITY

CHILD SUPPORT AFFIDAVIT

(This form must be notarized)

Applicant Name: _____

Child support payments that are received shall be included as income whether or not there is yet a court order awarding payment.

Child support amounts awarded by the court but not received can be excluded only when the applicant/resident certifies that payments are not being made and further documents that all reasonable legal action to collect amounts due, including filing with the appropriate courts or agencies responsible for enforcing payment, have been taken.

As part of the qualification process required by federal and/or state housing programs with jurisdiction over this development the following information is needed:

A. Do you receive child support? ☐ YES (Go to B) ☐ NO (Go to C)

B. I receive:

1. Payment amount \$ _____
2. Frequency _____
3. Children's names _____
4. Name of source _____

(Complete Multiple Affidavit Forms if There Are Multiple Sources)

5. Go to C. 1

C. 1. Have you been awarded child support by court order? ☐ YES (Go to C.2.) ☐ NO (Sign Form)

2. Provide copy of entire document, enter amount of award \$ _____, and frequency _____; go to C.3.

3. Is payment being received as awarded? ☐ YES (Go to 3.a.) ☐ NO (Go to 3.b.)

a. Indicate the manner by which payment is received and sign form.

- i. ☐ Enforcement Agency Name of Agency _____
(Provide Agency Print Out)
- ii. ☐ Court Order Name of Court _____
- iii. ☐ Direct from Responsible Party Name of Source _____
(Provide Affidavit or Statement from the Source)
- iv. ☐ Other (*explain*) _____

b. If payment not received or if amount received is less than amount awarded provide details and documentation of collection efforts.

Under penalty of perjury, I certify that the information presented in this affidavit is true and accurate to the best of my knowledge. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

X
Applicant/Resident Signature _____ Date _____

NOTARY:

Subscribed and sworn to before me this ____ day of _____, 20____.

Printed Name

(STAMP)

Signature

My Commission expires _____, 20____

Personally Known OR Produced Identification