

STATEMENT OF GIFTS RECEIVED BY THE FAMILY

Do you regularly receive monetary gifts or non-cash contributions?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes describe: \_\_\_\_\_  
\_\_\_\_\_

Money: Amount: \$ \_\_\_\_\_

Food: Value: \$ \_\_\_\_\_

Clothing: Value: \$ \_\_\_\_\_

Utilities: \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

Other: Type \_\_\_\_\_  
\_\_\_\_\_

Provider of Gifts: Person: \_\_\_\_\_  
Agency: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Date) Applicant/Tenant Signature

WARNING: SECTION 1001 OF TITLE 18, UNITED STATES CODE PROVIDES: "WHOEVER IN ANY MANNER WITHIN THE JURISDICTION OF ANY DEPARTMENT OR AGENCY OF THE UNITED STATES KNOWINGLY AND WILLFULLY FALSIFIES, CONCEALS, OR COVERS UP BY ANY TRICK, SCHEME, OR DEVICE A MATERIAL FACT, OR MAKES ANY FALSE, FICTITIOUS OR FRAUDULENT STATEMENTS OR REPRESENTATIONS, OR MAKES OR USES ANY FALSE WRITING OR DOCUMENT KNOWING THE SAME TO CONTAIN ANY FALSE, FICTITIOUS OR FRAUDULENT STATEMENT OR ENTRY, SHALL BE FINED UNDER THIS TITLE OR IMPRISONED NOT MORE THAN FIVE YEARS OR BOTH."

"This institution is an equal opportunity provider."

