



child support affidavit

I certify that the following is true regarding my current child support situation for: *(a separate form is required for each child)*

Child's Name	Child's Date of Birth
Head of Household Name	Unit Number

if you receive child support, please complete the section below that applies to this child

I receive child support in the amount of \$ _____ per _____ (week/month/year).

If support is received, one of the following must be selected:

My support is court-ordered (provide court order, divorce decree, or separation agreement).

My support is not court-ordered (provide contact information for person who provides support).

Support Provider Name: _____

Support Provider Telephone and/or Email: _____

if you don't receive child support, please complete the section below that applies to this child

I do not receive child support, and it has **not** been court-ordered.:

I will be seeking a court order and/or I expect to receive child support payments within the next 12 months (explain below):

I do not receive child support, but it has been court-ordered and I have made efforts to collect the amount due, such as filing with the agency responsible for enforcing payments (provide court order, divorce decree, or separation agreement).

I do not receive child support, but it has been court-ordered (provide court order, divorce decree, or separation agreement). I have not made efforts to collect the amount due because **(must provide a reason)**:

Financial reasons

Responsible party's location is unknown

Responsible party is deceased

Responsible party is incarcerated

This is a protective custody case

Other (describe): _____

signature

By my signature below, I also certify that I understand it is my responsibility to notify the landlord of any changes to the status of child support.

Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction.

Signature of Resident

Date

Printed Name of Resident