

# HOUSING AUTHORITY CITY OF NATCHITOCHE

536 Culbertson Lane, Natchitoches, LA 71458-0754  
(318) 352-9774 FAX (318) 357-8064

Public Housing email: [natchitochespublichousing@outlook.com](mailto:natchitochespublichousing@outlook.com)

Housing Choice Voucher email: [natchitocheshousing@outlook.com](mailto:natchitocheshousing@outlook.com)

## CONTRIBUTION INCOME REPORTING FORM

To verify to the Housing Authority that reported income is being provided to an applicant/tenant, please complete this document and return it to the Housing Authority Office as soon as possible. This income form may be emailed, dropped off, mailed or faxed back when completed.

Print name of person  
Giving Contribution; \_\_\_\_\_

Mailing Address; \_\_\_\_\_  
*Street or P.O. Box* *City* *St* *Zip*

Phone and Email: \_\_\_\_\_ Em \_\_\_\_\_

**I certify that I support the following individual with monetary contributions:**

\_\_\_\_\_  
Print Name of person who is receiving this income

\_\_\_\_\_  
Your Relationship to this person

**The total amount that I provide each month is; \$ \_\_\_\_\_,**

*NOTE: If providing non-monetary support to the family (diapers, clothing, food, etc), please include estimated value of items.*

**This income is for** (Check all that apply):

General Assistance       Housekeeping services       Yard services performed  
 Paying bills for family       Childcare or Adult-care/sitting services       Child Support (voluntary)  
 Other – explain: \_\_\_\_\_

Signature of Income Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Income Provider - Initial below if applicable;

\_\_\_\_\_ The Income I provide to the recipient will end when the recipient becomes self-sufficient and provides proof of sufficient income. (Becomes employed or begins receiving other adequate income).

**WARNING:** Title 18, Section 1001 of the United States Code, states that a person is **guilty of a felony for knowingly and willingly making false or fraudulent statements** to any department or agency of the United States.