



Housing Authority

STATE OF: NORTH CAROLINA

COUNTY OF: ORANGE

I, _____, being first duly sworn, deposed and say;
(Print Contributor's Name)

I, hereby certify that I **give** \$ _____ income per month to
(Contribution Amount)

(Print Recipient's Name)

(Signature of Contributor) (Date)

The foregoing statement herewith has been examined by me, and I certify it to be correct, true and complete to the best of my knowledge.

Affiant (Seal)

Subscribed and Sworn before me this _____ day of _____, 2019

Notary Public

Expiration date of Commission

Witness:

