

Head of Household Name: _____

No Income Certification

I, _____, herein certify that I currently have no source of income. I further certify that I understand that in the event I have a source of income in the future, I am obligated to report the amount and source of income to the Johnson County Housing Authority.

I understand that if I do not report any and all sources of household income, it will result in a debt to the Johnson County Housing Authority and possible **TERMINATION**.

Today's Date: _____

Signature: _____

Address: _____

City, State, Zip: _____ Kansas

Phone Number: _____

****If this is a change in your income, you must also complete a Change Report form.****

Title 18 Section 1001 of the US Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statement to any department of the US government.