

EXHIBIT E

**SAULT TRIBE HOUSING AUTHORITY
EMERGENCY RENTAL ASSISTANCE PROGRAM**

WRITTEN ATTESTATION - DECLARATION OF INCOME

I hereby declare that I (Name) _____

Have not received any income for the months indicated below: (specify month & year)

Have not received any income for the past 12 months indicated below: (specify month & year)

From: _____ through _____

My basic living needs (shelter, food, utilities) have been met for the above indicated months with the assistance of the person indicated below or as described below: Please explain.

Name: _____ Phone: _____

Address: _____ City _____ State _____

Explanation: _____

I am/have been paid in cash and unable to provide pay stubs, w-2, tax filings, etc.

Have been paid cash for the past 12 months as indicated below: (specify month, year and amount)

From: _____ through _____ Amount \$ _____

Weekly Monthly

Explanation: _____

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. I further understand that providing false representations constitutes as an act of fraud. I understand that providing false, incomplete, or inaccurate information on application forms, in which assistance has been or will be provided, may result in termination of eligibility and repayment of any funds received through this program; and other remedies available under applicable law.

Signature



Date