

Housing Authority of the City of Lanett, AL



“Verification of Income from Family and Friends”

I _____ hereby certify that I give _____
The amount of \$_____ (Weekly, Bi-weekly, Monthly, Semi-Monthly
to assist with his/her living expenses.

I will continue to provide this income until he/she establishes adequate income.

Signature

Date

Signature: _____
Notary Public

My Commission Expires On: _____