

**Child and Spousal Support  
Affidavit**

Applicant / Resident Name: Jane Smith  
 Development Name: Cupcake Estates  
 Unit Number / Identification: 115

**Child support and/or spousal support payments that are received shall be included as income whether or not there is yet a court order awarding payment.**

**Child/Spousal support amounts awarded by the courts but not received can be excluded only when third party documentation verifies that payments are not being made and that all reasonable legal actions to collect amounts due, including filing with the appropriate courts or agencies responsible for enforcing payment, have been taken.**

**As part of the qualification process required by federal and/or state housing programs with jurisdiction over this development the following information is needed:**

A. Do you receive child support and/or spousal support? Yes  No   
Go to B  Go to C.1

B. I receive: *\*Provide another form if there is more than one case*

1. Payment Amount \$ 400.00
2. Frequency Once a month
3. Name(s) of Recipient(s) James Smith  
Joann Smith
4. Name of Source(s) Jim Smith (Persons name paying support)
5. **Go to C.1**

C. Yes  No   
Go to C.2  Sign Form

1. Have you been awarded child or spousal support by court order?
2. **Provide copy of court order** *\*\* Provide full court order or divorce decree*  
 Enter amount of award: \$400.00  
 Frequency of award: Once a month

**Go to C. 3**

3. Yes  No   
 Is payment being received as awarded? Go to 3.a  Go to 3.b

*\* Provide "case Details" and most recent 12 months payment history \**

a. Indicate the manner by which payment is received and sign form.

- i.  Enforcement Agency **Name of Agency:** Cupcake County Support Enforcement  
*\* Provide Agency Printout*

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ii. _____ Court of Law	Name of Court: _____
iii. _____ Direct from responsible party	Name Source _____
iv. _____ Other	Explain: _____ _____
b. If payment is not received or if amount received is less than amount awarded, provide details and documentation of collection efforts. _____ _____ _____	

***Under penalty of perjury, I certify that the information presented in this affidavit is true and accurate to the best of my knowledge. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.***

**Resident Signature**  
\_\_\_\_\_  
Applicant/Resident Signature

**Date Completed**  
\_\_\_\_\_  
Date