

2223 West Loop South Houston, Texas 77027 Tel: (713) 439-6000

## **Residency & Income Support Affidavit**

I,	_, certify that I currently suppor
Supporter's Name	
	I have supported him/her since
Client's Name	Thave supported imminer since
To the best of my knowledge, his	s/her total monthly income is:
\$	
My address is:	
Street	
City, State, Zip	
The type of support I provide is:	
$\square$ room only $\square$ room and board $\square$ cash assistance	
other	
Relationship to client:	
☐ Parent ☐ Family Member ☐ Roommate ☐ Friend ☐	Other:
I can be reached at the following number to verify this informati	on:
Phone Number	
Signature	Date
OCEE/DCCP, Rev. 1/4/17 I:\Quality Analysts\Forms\2017\7E - Residency & Income Support Affidavit_	_English_010417.docx