



Housing Authority of the Sac and Fox Nation

201 N. Harrison • P.O. Box 1252 • Shawnee, OK 74801 • Ph (800)831-7515 • (405)275-8200 • Fax (405)275-8203

NO INCOME AFFIDAVIT

STATE OF OKLAHOMA)
) SS.
 POTTAWATOMIE COUNTY)

RE: **AFFIDAVIT OF:** **Name:** _____

Date of birth: _____

SS#: _____

Driver License or State Issued ID Verified:

Yes No # _____
Exp. _____

Being of lawful age, and upon my oath, the undersigned does affirm and state as follows:

1. **I have reported all income, including any unemployment benefits.**
2. **I do not currently have employment (including self-employment) at this time.**
3. **I will report any changes as they occur to my household income and composition.**

FURTHER AFFIANT SAYETH NOT.

Affiant

Date

Subscribed and sworn to before me this _____ day of _____, 2020.

Notary Public

My Commission Expires