



SELF-CERTIFICATION OF CHILD SUPPORT PAYMENTS RECEIVED

I, _____, residing at _____
Do hereby certify that I am receiving child support in the amounts and for the children listed below:

Full Name of Child/Children	Amount Received	How often Received*	Absent Parent
			Name: _____
			Name: _____
			Name: _____

* Monthly, Weekly, Bi-weekly (every other week), or Semi-monthly (twice a month)

If the person paying the support is not the absent parent please specify the relationship to yourself or the child. If you are receiving payments for more than three children please use a second Self-Certification form.

If the absent parent or another person provides goods or services to assist with support of the child you must provide a statement of the goods and services provided. Your statement must include the name, address and phone number of the absent parent or person providing the goods or services, the list of goods or services provided and how often they are provided. For example, if a grandparent pays day care you must provide a statement outlining that the grandparent pays daycare, the amount paid and how often. If the absent parent provides diapers, food, clothes, etc. you must provide a statement of the items provided and how often they are provided.

I certify that the above information is true and complete and that I understand that if anyone outside of my listed household provides goods and services I must report those goods and services to the Wake County Housing Authority.

Signature of Parent

Date

County of Wake
State of North Carolina

The foregoing instrument was acknowledged before me this _____ day of _____, 20____
by _____.

(Name of person signing document)

Notary Public
Registration #: _____
My Commission Expires: _____

WARNING: SECTION 1001 OF THE TITLE 18 OF THE UNITED STATES CODE MAKE IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR MISREPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.