

# VERIFICATION OF RESOURCES

Issued under P.A. 346 of 1966, as amended, and Section 8 of the U.S. Housing Act of 1937.

Head of Household's Name		HOH Last 4 SSN	
<b>SECTION A – ACCOUNT HOLDER INFORMATION</b>			
Account Holder's Name		Date of Birth	Last 4 SSN
Address	City	State	Zip Code

<b>SECTION B - TO BE COMPLETED BY BANK OR FINANCIAL INSTITUTION</b>						
<b>Bank or Financial Institution: Please complete this form and return by _____</b> <b>See attached consent form for authorization to release information.</b>						
NOTE: Verify resources held presently or within the past year for the person named above, either individually or jointly with another person(s) including closed accounts.						
<b>ACCOUNT HISTORY</b>						
Accounts held including checking/draft, savings/share, CD's, IRA/Keogh, mutual funds, etc.						
Account Type	Account Number	Date of Last Withdrawal	Amt of Last Withdrawal	Present Balance	Early Withdrawal Penalty Amt or %	Interest Rate %

Bank Name				
Address		City	State	Zip Code
Phone		Fax	Email	
<b>By signing this document, I certify under penalty of perjury that the information and statements I have provided are to the best of my knowledge true and accurate.</b>				
<b>X</b>				
Print name of Bank or Financial Institution's Representative			Date	

Please return completed form to:

**Gladwin County Court House**  
**Attn: Melanie Thume or Kimberly Hines, TPA**  
**401 W. Cedar St.**  
**Gladwin, MI 48624**