

**SNYDER COUNTY HOUSING AUTHORITY  
ZERO INCOME CHECKLIST & CONTRIBUTION WORKSHEET**

**\*This Form needs to be completed every month WITH bills and receipts attached to document expenses by the 15<sup>th</sup> of each month**

**Resident Name:** \_\_\_\_\_

**Date**

**Resident Address:** \_\_\_\_\_

**Resident Social Security Number:** \_\_\_\_\_

**1. FOOD EXPENSES**

Is the family receiving Food Stamps?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Monthly Food Stamp Value	\$
How much <b>weekly</b> do you spend on groceries?	\$ _____		
How do you pay for your groceries?	_____		
<small>HUD Regulation considers this income and must be in alignment/reflective of family size</small>			

**2. PAPER PRODUCT EXPENSES**

What is the <b>weekly</b> value of paper products used by the family? <small>(paper napkins, toilet paper, paper towels, trash bags, other paper goods, disposable diapers, etc.)</small>	\$ _____
How does the family pay for these items?	_____
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**3. GROOMING PRODUCT EXPENSES**

What is the <b>weekly</b> value of grooming products used by the family? <small>Include toothpaste, hair products, feminine products, shampoo, conditioner, body wash, soap, etc.</small>	\$ _____
How does the family pay for these items?	_____
<small>HUD Regulation considers this income and must be in alignment/reflective of family size</small>	

**4. CLEANING PRODUCT EXPENSES**

What is the <b>weekly</b> value of cleaning products used by the family? <small>Include dish soap, air fresheners, floor cleaner, floor wax, ammonia, house cleaners, etc.</small>	\$ _____
How does the family pay for these items?	_____
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Name:

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**5. TRANSPORTATION EXPENSES**

Does the family own a car?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much is the car payment?	\$				
How does the family pay the car payment?							
What are the average <b>monthly</b> amounts the family pays for the following:	\$						
Gas	\$	Maintenance'/Fluids	\$	Insurance	\$	Tires	\$
How does the family pay for these expenses?							
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Does the family use the bus or a cab?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much does it cost <b>weekly</b> ?	\$
How does the family pay for these services?			

**6. ENTERTAINMENT EXPENSES**

Does the family have cable television?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much does it cost <b>monthly</b> ?	\$
How does the family pay for the cable service?			
<i>HUD Regulation considers this income and must be in alignment/reflective of family size</i>			

What are the average <b>monthly</b> amounts the family pays for the following?					
Lottery	\$	Movie/Game Rentals	\$	Alcohol	\$
How does the family pay for these entertainment expenses?					
<i>HUD Regulation considers this income and must be in alignment/reflective of family size</i>					

**7. CLOTHING EXPENSES**

What is the <b>monthly</b> value of clothing & shoes for the family?	\$
How does the family pay for these items?	

What is the average <b>weekly</b> amount spent by the family for laundry/dry cleaning clothing? (includes soap, fabric softener, dryer sheets, etc.)	\$
How does the family pay for laundry expenses?	
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Name: \_\_\_\_\_

Address: \_\_\_\_\_

**8. SMOKING EXPENSES**

Does anyone in the tenant household smoke cigarettes or cigars?	<input type="checkbox"/> Yes	
	<input type="checkbox"/> No	
If yes, how many packs per day are smoked by the smokers in the household?		
What is the average <b>weekly</b> cost of cigarettes/cigars for the family?	\$	
How does the family pay for cigarettes/cigars?		
<i>HUD Regulation considers this income and must be in alignment/reflective of family size</i>		

**9. COMMUNICATION EXPENSES**

Does the family have a home phone?	<input type="checkbox"/> Yes	If yes, how much does it cost <b>monthly</b> ?	
	<input type="checkbox"/> No		\$
How does the family pay for the home phone service?			
Does the family have a cellular phone?	<input type="checkbox"/> Yes	If yes, how much does it cost <b>monthly</b> ?	
	<input type="checkbox"/> No		\$
How does the family pay for the cellular phone service?			
<i>HUD Regulation considers this income and must be in alignment/reflective of family size</i>			

Does the family have internet?	<input type="checkbox"/> Yes	If yes, how much does it cost <b>monthly</b> ?	
	<input type="checkbox"/> No		\$
How does the family pay for the internet service?			
<i>HUD Regulation considers this income and must be in alignment/reflective of family size</i>			

**10. UTILITY EXPENSES**

Does the family pay for any utilities?	<input type="checkbox"/> Yes	If yes, how much does it cost <b>monthly</b> ?	
	<input type="checkbox"/> No		\$
How does the family pay for the utilities? (list each)			
<i>HUD Regulation considers this income and must be in alignment/reflective of family size</i>			

**11. MISCELLANEOUS EXPENSES**

Does the family pay for rental/purchase of furniture?	<input type="checkbox"/> Yes	If yes, how much does it cost <b>weekly</b> ?	
	<input type="checkbox"/> No		\$
How does the family pay for the furniture?			
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Name:

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**11. MISCELLANEOUS EXPENSES (CONTINUED)**

Does the family pay for rental/purchase of electronics?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much does it cost <b>weekly</b> ?	\$
How does the family pay for this merchandise?			
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Does the family pay for rental/purchase of appliances?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much does it cost <b>weekly</b> ?	\$
How does the family pay for this merchandise?			
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What are the average <b>monthly</b> amounts the family pays for the following?			
Manicure \$	Hair Styling \$	Pedicure \$	
How does the family pay for these expenses?			
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Does the family have unreimbursed school expenses?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much does it cost <b>weekly</b> ?	\$
How does the family pay for these expenses?			
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Does the family have unreimbursed child care expenses?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how much does it cost <b>weekly</b> ?	\$
How does the family pay for these expenses?			
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**LIST ALL MONIES YOU HAVE RECEIVED IN THE PAST THIRTY DAYS:**

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Under the penalty of perjury, I hereby certify that the declarations I have made in this document are true and complete. I understand and acknowledge that any knowing or willful misrepresentation of the declarations (including submission of falsified supporting documentation to support my declarations) contained in this document may result in civil liability and/or criminal penalties, including by not limited to fine or imprisonment, or both under the provisions of Title 18 of the United States Code (USC), Section 1001. A person convicted of violation 18 USC 1001, shall be fined not more than \$10,000, or imprisoned not more than 8 years, or both.

SIGNATURE

DATE

**ZERO INCOME CHECKLIST & CONTRIBUTION WORKSHEET**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

**INCOME FROM CONTRIBUTIONS WORKSHEET**

		<b>AMOUNT</b>	<b>TERM</b> (Wk x 52, Mo x 12, Bi-Wk x 26, etc.)	<b>TOTAL ANNUAL</b> <b>AMOUNT</b>
<b>1.</b>	<b>FOOD</b>			
	Groceries (in excess of Food Stamp allotment)			
<b>2.</b>	<b>PAPER PRODUCTS</b>			
	Napkins, toilet paper, paper towels, trash bags, other paper goods, disposable diapers, etc.			
<b>3.</b>	<b>GROOMING PRODUCTS</b>			
	Toothpaste, hair products, feminine products, shampoo, conditioner, body wash, soap, etc.			
<b>4.</b>	<b>CLEANING PRODUCTS</b>			
	Dish soap, air fresheners, floor cleaner, floor wax, ammonia, house cleaners, etc.			
<b>5.</b>	<b>TRANSPORTATION</b>			
	Car Payment			
	Gas, Maintenance/Fluids, Insurance, Tires			
	Bus/Taxi Cab			
<b>6.</b>	<b>ENTERTAINMENT</b>			
	Cable Television			
	Lottery, Movie/Game Rentals, Alcohol, etc.			
<b>7.</b>	<b>CLOTHING</b>			
	Clothing & Shoes			
	Laundry/cleaning -- soap, fabric softener, dryer sheets, etc.			
<b>8.</b>	<b>SMOKING</b>			
	Cigarettes or Cigars			
<b>9.</b>	<b>COMMUNICATION</b>			
	Home Phone			
	Cellular Phone			
	Internet Service			
<b>10.</b>	<b>UTILITIES</b>			
	Heat Hot Water Electric Water Sewer Trash			
<b>11.</b>	<b>MISCELLANEOUS</b>			
	Furniture Rental/Purchase			
	Electronics Rental/Purchase			
	Appliances Rental/Purchase			
	Manicure, Hair Styling, Pedicure			
	School Expenses			
	Child Care			
	<b>TOTALS</b>			