ZERO INCOME WORKSHEET: Name:_____

FOR TENANTS OF LEXINGTON HOUSING AUTHORITY OR HOUSING CHOICE VOUCHER PROGRAM PARTICIPANTS

To be turned in by the 15th of Every Month. All monies given to you must be written down and included in this report. Failure to keep this worksheet would mean you are in non-compliance by not providing information you have been asked for. As long as you do not have a regular income of ADC, Child Support, Employment (or something that is regular pay) you must complete this worksheet.

Date:	Income Amount	Name of Person or Organization providing money	Address of Person or Organization
N:\Staff\Lisa\Desktop\Policies			