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FairmontHousing.org   

Contribution To Family

I, _____
[Please Print Name]

certify that I contribute the following amount: \$ _____

Per Week Per Month

to: _____

who lives at: _____

[Signature]

[Date]

This Statement Must Be Notarized

State of: _____

County of: _____

Signed, This: _____ Day of: _____ 20____

In the Presence of: _____

[Signature of Notary]

Warning: Title 18, Section 1001 of the United States Code, states that a person who knowingly makes false or fraudulent statements to any department or agency of the United States is guilty of a felony.