

## RENTAL ASSISTANCE FOR MISSISSIPPIANS EMERGENCY RENTAL ASSISTANCE (ERA) PROGRAM DOCUMENTATION OF FINANCIAL HARDSHIP

the household has experienced other fin	npleted by one or more inc perienced a reduction in h ancial hardship due, direc ithin the household has qu	nousehold income, ir tly or indirectly, to C	curred significant of OVID-19. Docume	costs, or intation that one
First Name	Last Name	MI		
Street Address	Ant No.	City	State	710
Street Address	Apt No.	City	State	Zip
household income.  Describe the reduce	ction in household income	experienced (be spo	ecific):	
,	at one or more individuals	•	d incurred significa	ant costs.
Describe the signif	icant costs incurred (be sp	pecific):		
hardship due, directly	at one or more individuals or indirectly, to COVID-19	9.	d experienced oth	er financial
Describe the infant	cial hardship experienced	(ne specific):		

Under penalty of perjury, I attest that the information	ation presented in this written attestation is true and
accurate to the best of my knowledge. I further u	inderstand that providing false representations
constitutes an act of fraud. False, misleading, or i	ncomplete information may result in my obligation to
repay any funds received through the Emergency remedies available under applicable law.	Rental Assistance Program and/or other penalties or
Signature	Date

False Claim Statement. Warning: U.S. Code, Title 31, Section 3729, False Claims, provides a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages for any person who knowingly presents, or causes to be presented, a false or fraudulent claim; or who knowingly makes, or caused to be used, a false record or statement; or conspires to defraud the Government by getting a false or fraudulent claim allowed or paid.