



BHA

APARTMENT COMPLEXES:

- PARK HOMES
- GEORGE SMITH
- SUNSET TERRACE
- LA VILLITA
- COMMERCE MANOR

Brownwood Housing Authority

P.O. Box 1647 BROWNWOOD, TEXAS 76804
 TELEPHONE: (325)646-0790
 FAX: (325) 646-7799

EXECUTIVE DIRECTOR
DAVID LONG

david@bwdhousing.org

HOUSING CHOICE VOUCHER PROGRAM

GWEN GAINES – SUPERVISOR

gwen@bwdhousing.org

PUBLIC HOUSING

MARY HALES - SUPERVISOR

mary@bwdhousing.org

MANAGING AGENT

CHRISTY MERCER - SUPERVISOR

christy@bwdhousing.org

MAINTENANCE

MICHAEL LANDERS - SUPERVISOR

mike@bwdhousing.org

CHILD CARE EXPENSE VERIFICATION

Date: _____

To: _____

Phone No. Of Care Provider

Our office is required to verify the income and expenses of applicants and participants on our Housing Programs. We have been advised that you care for the children listed below. Please complete the information below as it may benefit the family in the portion of rent they will have to pay. The form should be returned by: _____.

Sincerely,

Brownwood Housing Authority

I, authorize the release of this information: _____

Signature of Applicant/Participant

Date

Please list the names of all this family's children who are in your care:

How Much do you receive for the care of these children?

\$ _____ per week \$ _____ per mo.

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT:

Signature of Child Care Provider _____ Date _____

Address _____ Phone No. _____

City, State, Zip Code _____ Fax. No. _____