



APARTMENT COMPLEXES:
 PARK HOMES
 GEORGE SMITH
 SUNSET TERRACE
 LA VILLITA
 COMMERCE MANOR

BHA

Brownwood Housing Authority
 P.O. Box 1647 BROWNWOOD, TEXAS 76804
 TELEPHONE: (325)646-0790
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EXECUTIVE DIRECTOR
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MICHAEL LANDERS - SUPERVISOR
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TENANT CERTIFICATION OF NO MEDICAL EXPENSE

DATE: _____

I, _____, MAKE THIS STATEMENT TO BHA, THAT I DO NOT HAVE ANY MEDICAL EXPENSE FOR MYSELF OR ANY FAMILY MEMBER AT THIS TIME.

I UNDERSTAND THAT MEDICAL EXPENSES INCLUDE, BUT ARE NOT LIMITED TO THE FOLLOWING:

- | | | | |
|----------------|------------------------------|-------------------|------------------------|
| Physician Care | Hospital Care | Therapy | Medical Transportation |
| Dental Care | Prescriptions | Medical Insurance | |
| Eye Care | Over the Counter Medications | | |

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

 Tenant/Applicant Signature

 Date

 Tenant/Applicant Signature

 Date

 Staff Member

 Date

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United State as to any matter within it's jurisdiction.