3) For Commission	n Pay: Any base pay amount per month \$	\$	_ per	
Will this amount chang	je in the next 12 months? Ye	es No		
if yes, new amount	Effective Da	ite		
<ol> <li>Other Pay Set-up pay period.</li> </ol>	o: Including tips, bonuses, o	r any form of c	compensation. De	escribe and list amounts and
Type of Pay	Amount \$	Monthly	Yearly	average ( <u>check one</u> )
		\$		
Yes No if	e in pay in the next 12 month yes, new pay rate	Effective	e Date	
5) Please estimate sources:	the annual amounts the emp	loyee earned o	during <u>the last 12</u>	months from the following
Wages or Salary: \$_ \$	Commission: \$	5	_ Overtime: \$	Tips:
Bonus \$	other \$	_		
(Additional remarks:				
				)).
Employer Verification:				
Print Name & Title of person	on supplying this information	Signa	ture & Date	
Name of Firm/Organization	۱	Telep	phone #	
You do not have to sign	this form if either the reque or the organization supply			nk
I hereby authorize the rel Housing Authority.	ease of the above information	on relative to	my earnings and	employment to the Holyoke
Signature of Applicant/Res	sident		Date	

Penalties for Misusing this Consent: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government, HUD, the PHA and any owner (or employees of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purpose cited above. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure or information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized