

**HOUSING AUTHORITY OF THE COUNTY OF STANISLAUS  
NOTIFICATION OF  
REDUCTION IN FAMILY SIZE**

On \_\_\_\_\_, 20\_\_\_\_, you reported that a family member has moved out of your residence.

**Please complete the questions below.**

1. Name of family member who moved. \_\_\_\_\_

2. What date did this person move? \_\_\_\_\_, 20\_\_\_\_.

3. Where did they move to?

\_\_\_\_\_

Street Address

City/State

Zip

4. Will they be gone [ ] temporarily? [ ] permanently?

If temporarily absent, when will they return to your household?

5. List below the persons remaining in your household.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The following is a list of examples of documents that may be used as proof that a family member has moved out ("has moved out", not "will move out") of the home, as long as each document has the necessary information on it. Each document must be "third party proof"--a document from an agency or a business. **COMPLETED FORMS ARE NOT ACCEPTED.** Information necessary on each document includes the name of the person that has moved out, his/her CURRENT RESIDENCE address, and the date the document is effective (must be a current date). **THREE documents from three different sources are required as proof.**

- |  |  |
|--|--|
| ◆ Computer printout from DMV               | Receipt from the post office             |
| ◆ Notice of Action from Welfare Department | Letter from school                       |
| ◆ Copy of rental lease                     | Letter/computer printout from SS         |
| ◆ Pay stubs                                | Bills (one of each)-utility/phone/credit |
| ◆ Bank Statement(s)                        | card/other bills                         |

REMEMBER--These are just examples of documents that you may provide. You may have other papers with the necessary information, BUT the documents MUST meet the above requirements.

FAUSERS\RENTVAL\APROVED FORMS\REDUCTION IN FAMILY SIZE

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

I certify that the information contained herein is true and correct. I also understand and agree that only those person(s) living in my household will use my address as their mailing address.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date