



PHONE: FAX:

OFFICE USE ONLY	
FORM #:	406
HOUSEHOLD ID:	
TICKLER #:	
EFFECTIVE DATE:	

CHILD CARE STATEMENT

PART 1: HEAD OF HOUSEHOLD TO COMPLETE

Name of Daycare: _____
 Address: _____ Phone: _____
 Name of Parent/Family: _____
 Address: _____ Phone: _____

In order for the King County Housing Authority to approve this request, you must include proof of payment (e.g. letter from daycare, receipts from child care provider, canceled checks, etc.) or have this form completed and notarized by the provider of the childcare expenses being \$2,500 or more. If someone in the household is 18 years or older and does not work, you do not qualify for a childcare deduction.

I certify that the cost of the childcare listed below is not being reimbursed by any other source. I certify the information given is true and correct to the best of my knowledge. I am aware that misrepresentation to the Housing Authority is considered fraud and is cause for termination of my housing:

Signature of Parent / Participant / Family Representative _____ Date _____

PART 2: CHILD CARE PROVIDER TO COMPLETE (only required if no proof of payment attached)

I certify that I/we provide child care for the minor children (children under 13) of the above listed family. The children's names are as follows:

We receive payment in the amount of \$ _____ per child per Hour Day Week Month .
 The children are under my/our care an average of _____ hours per week.

Does the above family receive assistance from an outside source?
 Yes No If yes, please indicate amount of subsidy received and the source of the subsidy:

Source: _____ Subsidy Amount per child: _____
 Family/Participant co-payment: \$ _____

Signature of Child Care Provider to be notarized below _____ Date _____

State of Washington, County of _____
 On this day personally appeared before me _____ to me known to be the individual(s) described in and who executed the within forgoing instrument and acknowledged to me that _____ signed the same as _____ free and voluntary act and deed for the purposes therein mentioned.

Given under my hand and official seal this _____ day of _____, 20 _____

NOTARY PUBLIC in and for the State of Washington, residing at _____