

**STATEMENT OF CASH PAID WAGES**

I, \_\_\_\_\_, verify that I am paid cash for my  
employment at \_\_\_\_\_.

My total wages are:

Hours per week: \_\_\_\_\_

Wage per hour: \_\_\_\_\_

Total annual anticipated wages: \_\_\_\_\_

\_\_\_\_\_  
Signature of Tenant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Housing Authority Representative

\_\_\_\_\_  
Date

*If you are disabled or you need assistance in completing the attached form,  
please contact your Housing Specialist for assistance at: (262) 653-4120*