



HOUSING AUTHORITY OF THE COUNTY OF KERN



STEPHEN M. PELZ
Executive Director

601 – 24TH STREET • BAKERSFIELD, CA 93301
PHONE: 661/631-8500

FAX (661) 631-9500
TDD 661/631-1047

CERTIFIED STATEMENT

Knowing the penalty for making a false statement under the United States Criminal Code, I

_____, hereby certify that the following is a true and full statement.

Please print name

Signature

Date

Witnessed by: (please print name)

Date

Witness Signature

*Section 35 (A) of the United States Criminal Code makes it a criminal offense, punishable by a maximum of ten (10) years of imprisonment, \$10,000 fine or both, to make a false statement or representation to any Department or Agency of the United States as to any matter within their jurisdiction. The information given above was requested by the **Housing Authority of the County of Kern** in its capacity as a City, State, and Federal Agency.*