Exhibit 19

Non-Recurring Contributions Certification

(To be completed by <u>adult</u> household members only, if appropriate.)

	Applicant/Resident Name:		Unit No.
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1. I/We hereby certify that I/we do not receive any of the following contributions on a recurring basis:

_____ Cash contributions or gifts from persons not living in my household; (Initials)

_____ Assistance, donations, contributions or gifts from organizations; and (Initials)

_____ Assistance for my/our living expenses such as: (Initials)

- Rent
- Groceries/food/beverages
- Utilities
- Clothes
- Housekeeping supplies
- Personal care products
- 2. I/We hereby certify that I/we do not receive any periodic and determinable allowances, such as alimony and child support payments.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Signature of Head of Household	Printed Name of Applicant/Resident	Date
Signature of Applicant/Resident	Printed Name of Applicant/Resident	Date
Signature of Applicant/Resident	Printed Name of Applicant/Resident	Date



