



**ERIE METROPOLITAN HOUSING AUTHORITY**  
**322 WARREN ST., SANDUSKY, OH 44870**  
**419-625-0262**

CHANGE IN INCOME REPORTING FORM

TODAY'S DATE: \_\_\_\_\_

CLIENT NAME: \_\_\_\_\_

CONTACT TELEPHONE NUMBER: \_\_\_\_\_

YOUR CASE MANAGER'S NAME: \_\_\_\_\_

**PLEASE BE SPECIFIC WHEN REPORTING YOUR CHANGE:**

- NEW EMPLOYMENT:
  - NAME OF NEW EMPLOYER: \_\_\_\_\_
  
- CHANGE OF EMPLOYERS:
  - NAME OF PREVIOUS EMPLOYER: \_\_\_\_\_
  - LAST DATE WORKED: \_\_\_\_\_
  - NAME OF NEW EMPLOYER: \_\_\_\_\_
  - FIRST DATE OF NEW EMPLOYMENT: \_\_\_\_\_
  
- LOSS OF EMPLOYMENT:
  - NAME OF EMPLOYER: \_\_\_\_\_
  - LAST DATE WORKED: \_\_\_\_\_
  
- INCREASE OR DECREASE IN WORK HOURS:
  - DATE HOURS INCREASED OR DECREASED: \_\_\_\_\_
  - CURRENT NUMBER OF HOURS WORKED: \_\_\_\_\_
  - IS THIS AN INCREASE OR A DECREASE IN HOURS?    Increase    Decrease
  
- OTHER CHANGE(S) OF INCOME: \_\_\_\_\_  
\_\_\_\_\_

**IF YOU PAY CHILDCARE WHILE ATTENDING WORK OR SCHOOL:**

- CO-PAY THRU ERIE COUNTY JOB & FAMILY SERVICES \_\_\_\_\_
  
- PRIVATE BABYSITTER:
  - NAME OF BABYSITTER: \_\_\_\_\_
  - ADDRESS OF BABYSITTER: \_\_\_\_\_
  - PHONE NUMBER OF BABYSITTER: \_\_\_\_\_

**CHANGES TO REPORT OTHER THAN ABOVE:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_