



ATTACHMENT C Board of Directors Representation

This certification must be provided for each member listed on Attachment B, the Board of Directors Information Form. If this attachment is not signed and dated by the applicable Board member, it will not be accepted and will be counted as a missing or incomplete item.

Section A – Board Member Information

Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Phone: _____

Section B – Indicated the Sector this Board Member represents:

____ Low-Income Community Section *(If checked, please complete Section E)*

____ Public Sector

____ Private Sector

Section C – Employer Employer: _____

Section D – Provide a listing of all federal, state, or local government commissions committee memberships:

Section E – Low-Income Community Sector Representation:

I am a Low-Income Community Representative on the Board of Directors for _____
(name of non-profit/organization)

I qualify as a Community Representative under the HOME definition of Community Housing Development Organization (CHDO) in Subpart A, Section 92.2 of the HOME Regulations because; Please check the appropriate box below:

____ I am a resident of a low-income neighborhood in the community where 51% or more of the household incomes are at or below 80% of the median income, as defined by HUD. *Census Tract: _____ (If applicable, attach Census Report)*

____ I am a low-income resident of the community. I qualify as a low-income resident under the HOME Program definition. The number of household members in my home is _____. My **household** annual gross income is at or below 80% of _____ county's median income in the amount of \$ _____.

____ I am an elected representative of a low-income neighborhood organization. The low-income organization is called _____. I will provide (behind **Tab 4**) the meeting that demonstrate my election to the Board of Directors for the non-profit. In addition, I will provide the selection criteria/process used for my election.

Section F – Certification

By signing and dating this statement, I hereby certify that all information represented above is true and correct to the best of my knowledge.

Signature of Board Member

Date

Signature of Board Chairperson

Date

Printed Name – Board Member

Printed Name – Board Chairperson