## REQUEST FOR PORTABLE VOUCHER

I am requesting to take my Voucher to the following Housing Agency to administer: (Please print the following information.)

	Name of Housing Agency:		
	Address:		
	City, State & Zip Code:		
	Telephone Number:		
	Fax Number:		
	Name of Person to Contact:		
	Email of Contact Person:		
	Date I am planning to relocate:		
	Tenant Name:		
	Present Address:		
	Phone Number:		
I understand I must give my current landlord 30-day notice and provide ALHRA with a copy of that notice.			
	(Signature of Participant)	(Date)	

Warning: 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document or writing containing any false, fictitious, or fraudulent statement or entry, in any matter within the jurisdiction of any department or agency of the United States, shall be fined not more than \$10,000, imprisoned for not more than five years, or both.