

AFFIDAVIT – NO FINANCIAL ACCOUNTS

I,	, have applied for the City of Livermore Below Market
Rate (BMR) program. Program re	gulations require disclosure of all financial accounts in my name.
to:Checking accountsSavings accountsCertificate of Deposit (CD	s, 403b, Pensions, TSA etc.)
, i	tation of information or failure to disclose information requested on this icipation in the City of Livermore program.
I certify that the above information	n is true and correct.
Signature:	Date: