## Special Claims Schedule

## U. S. Department of Housing and Urban Development

OMB Approval No. xxxx-xxxx (xx/xx/xxxx)

Office of Housing Federal Housing Commissioner

Instructions	Project Name		FHA Project No.		Section 8 / PAC / PRAC Contract No.	
Follow guidelines in HUD						
Handbook 4350.3, Rev. 1 Chapter 9						
			Type and Amount of Claim (\$)			
		· γρο απα Απισαπι οι σιαπι (ψ)				
Head of Household Name	Unit	Unpaid Rent	Tenant	Rent-Up	Regular	<b>Debt Service</b>
Last, First, Initial	Number	from HUD	Damages from	Vacancies from	Vacancies from	from HUD
		52671- <b>A</b>	HUD 52671-A	HUD 52671- <b>B</b>	HUD 52671-C	52671- <b>D</b>
44)	(0)	(0)	(4)	(5)	(0)	( <del>-</del> )
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Totals					
I certify: (a) the above amounts have been computed in accordance with all instructions and requirements prescribed by HUD and the applicable Section 8 / PAC / PRAC Contract; (b) all prerequisites to and conditions for the assistance claimed have been met; and (c) all required documentation will be retained in the project's files for 3 years.			HUD/Contract Ac	Iministrator Review	1	
			Claim approved.			
			Claim adjusted. Reason:			
			Claim denied. Reason:			
Owner's printed name, signature, date and phone no.			Official's name, signature, and date			
III ID will proceed the state of the state o	Commission of the control of	de incominate of				
HUD will prosecure false claims and statements. Conviction may result in criminal and/or civil penalties (18 U.S.C. Sections 1001, 1010, 1012; 31 U.S.C. Sections 3729,						
3802).	1010, 1012, 31 0.3.0	. 05000113 3723,				
/· 						