

DEBIT EXPRESS CARD VERIFICATION

Name: _____

Date: _____

To be completed by office staff:

Last 4 numbers of Debit Express Card: _____

Do the last 4 numbers on the Debit Express Card match the bank receipt provided? Yes No

Name on Debit Express Card: _____

Does the name on the Debit Express Card match the tenant/applicants name? Yes No

I verify that I saw this household members Debit Express Card and that the information provided above is true and correct to the best of my knowledge.

Name of Staff Member Verifying Information

Signature of Staff Member

Copy of bank receipt goes here