

**Miscellaneous Accounting Requests for  
Schedule of Tenant Assistance Payments Due**

**U.S. Department of Housing  
and Urban Development  
Office of Housing**

OMB Approval No. 2502-0182  
(exp. mm/dd/yyyy)

Before completing this form, read and follow the instructions in the Monthly Activity Transmission (MAT) User's Guide. See the statements on form HUD-52670 Housing Owner's Certification and Application for Tenant Assistance Payments for information on public burden. **Warning:** Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012; 31 U.S.C. §§ 3729, 3802).

1. Asst. Pymts Due for (mm/yyyy):		2. Project Name:		3. Project Number:	4. Contract Number:	5. Type of Subsidy:	
6. Head of Household Name Last, First, Initial	7. Unit Number	8. Misc. Request Type	9. Comment			10. Amount Requested	11. Approved (HUD/CA use only)
						12. Totals for this page	