
VA RELATIVE AND CHILD CARE INFORMATION

NEAREST LIVING RELATIVE
(not living with veteran)

Name _____

Relationship to Borrower _____

Address _____

City _____ State _____ ZIP _____

Phone _____

CHILD CARE INFORMATION

I/we certify that we pay \$ _____ per week in child care expenses

Name and address of child care provider:

I/We certify that we do not have any child care expenses because:

_____ Date

_____ Date