

Middle Kentucky



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Jackson, KY 41339
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Darrell R. Shouse
Executive Director

Bill of Declaration

I live at the service address listed on the attached bill. I am responsible for payment of this bill, even though it is not in my name.

Client Signature

Date

Address

Phone Number

Staff Signature

Date

Staff Notes:

Staff Please Check:

☐ **Written statement from the account holder(s) is included in case file.**