

**Boston Housing Authority
Fraud/Compliance Report Form**

I. Person(s) Being Reported

Name: _____

Address: _____ Apt/Unit: _____

City: _____ Zip: _____

Phone (if known): _____

This person is a: ___ Tenant
 ___ Owner or Property Manager

Length of time activity has occurred: _____

Describe the suspected fraudulent activity: (Please include the first name and last name of all person(s) involved, places, and date of events, employers if applicable and any other individuals that would be willing to speak to us or are aware of the situation.)

(Use additional sheet if necessary)

II. Optional Information

Your name: _____

Please check one: ___ Contact me by email - email address: _____

 ___ Contact me by telephone

 My daytime telephone number is: _____

 The best time to call me is between: _____ and _____

 ___ Do not contact me

(For office use only) Date received: _____