WEST VIRGINIA HOUSING DEVELOPMENT FUND
LOW-INCOME HOUSING TAX CREDIT PROGRAM
MAILING LIST INFORMATION PROFILE SHEET

Name: _____
First **Middle** **Last**

Position: _____ **Department:** _____

Company:
_____

Address: _____
Street **Suite** **P. O. Box**

_____
City **State** **Zip Code**

Office Telephone Number and Extension: _____ **Office Fax Number:** _____

Mobile Telephone Number: _____ **Pager Number:** _____

Internet Address: _____ **E-Mail Address:** _____
(MUST HAVE)

Affiliation with the Low-Income Housing Tax Credit Program (Please check only one):

_____ **Current West Virginia Low-Income Housing Tax Credit Program Project Owner**

_____ **Prospective West Virginia Low-Income Housing Tax Credit Program Developer**

_____ **Current West Virginia Low-Income Housing Tax Credit Program Project Manager**

_____ **NCSHA/State Housing Finance Agency**

_____ **Local Public Housing Authority**

_____ **Other (please specify)** _____

_____ **Lender**

_____ **Syndicator**

_____ **Attorney**

_____ **Accountant**

_____ **Governmental Agency**

PLEASE COMPLETE AND RETURN THIS INFORMATION PROFILE SHEET AND YOUR CHECK FOR $50.00 FOR A ONE-YEAR SUBSCRIPTION TO THE:

WEST VIRGINIA HOUSING DEVELOPMENT FUND
ATTENTION; TAMMY EDELMAN
814 VIRGINIA STREET, EAST
CHARLESTON, WV 25301