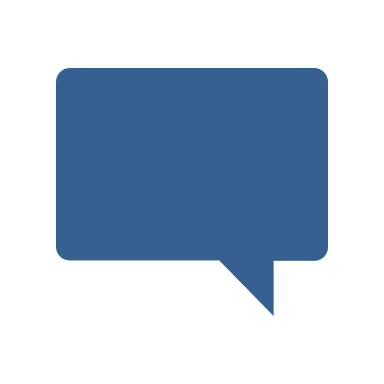
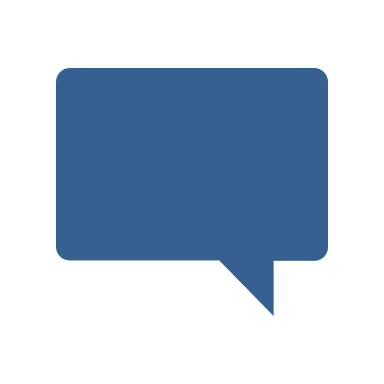
A picture containing clock, drawing

Description automatically generated****

**Can’t pay your full rent due to COVID-19 related loss of income?**

**You may be eligible as a resident of [Property Name] to receive short-term rental assistance from the City.**

**Please contact [Owner Name] to determine if you qualify!**

A picture containing clock, drawing

Description automatically generated

**¡Por favor póngase en contacto con ( ) para determinar si usted califica!**

**¿No puede pagar su renta completa debido a la** **pérdida de ingreso por el COVID-19?**

**Usted puede ser eligible como residente de ( ) a recibir asistencia de la Ciudad con el pago de su renta por tiempo limitado.**

**Recursos COVID-19: alexandriava.gov/coronavirus | alexandriava.gov/114737**

**COVID-19 resources: alexandriava.gov/coronavirus | alexandriava.gov/114737**