

TO BE COMPLETED FOR ANY ADULT (18 years of age or older) who is SELF EMPLOYED, receives ZERO income, is paid in cash, OR has a gap in income.

DECLARATION OF INCOME STATEMENT (DECLARACION DE INGRESOS)

1) Applicant Information

Applicant Name (Nombre del Solicitante)	Applicant Last Name (Apellido)	Suffix (Sufijo)
Address (Dirección)	City (Ciudad)	Zip Code (Código Postal)

State the gross income for household members, **18 years and older**, who have **no documentation of the income received** in the **30 day period** prior to the date of application for assistance: *(Declarar el ingreso recibido por los miembros de su hogar, que tienen 18 años de edad ó mas, y que no tienen documentación de ingresos por los 30 dias antes del aplicar para asistencia)*

2) List the household members name(s) and the gross amount of income received in the last 30 days.

Name (Nombre)	Gross Income Received (Ingreso Bruto Recibido)	\$
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My household has **no documented** proof of income due to the following situation *(Mi hogar no tiene prueba para documentar los ingresos por medio de tal razones):*

3) explain why the household member(s) cannot provide proof of income.

I certify that the above information is true and correct to the best of my knowledge and belief. *(Yo certifico que la información proveida de los ingresos es verdadera y correcta según mi saber y creencia.)* **I understand that the information will be verified to the extent possible; and that I may be subject to prosecution for providing false or fraudulent information.** *(Comprendo que la información será verificada hasta donde sea posible y que puedo ser enjuiciado por haber proveido información falsa ó fraudulenta.)*

4) Sign and date the form.

(Applicant Signature/Firma del Solicitante)

(Date/Fecha)

"Texoma Council of Governments may verify the income of households applying for Weatherization, Utility Assistance, or Family Assistance (CSBG) to confirm eligibility."