

Attestation of No Income

Adult Household Member Name(s) for those certifying no income

Adult 1 Name:

Adult 2 Name:

Adult 3 Name:

I certify that the information provided is true and accurate to the best of my knowledge. I understand that misrepresenting household income may constitute fraud. If I indicated that I have no income, I affirm that is accurate and I understand that I may be asked for additional information and documentation to determine eligibility, which may delay the processing of my application. I understand that providing false, misleading or incomplete information may result in ineligibility for this program, repayment or recapture of funds, and other legal action.

Adult 1 SIGN HERE:

Adult 1 Printed Name:

Adult 1 Date Signed:

Adult 2 SIGN HERE:

Adult 2 Printed Name:

Adult 2 Date Signed:

Adult 3 SIGN HERE:

Adult 3 Printed Name:

Adult 3 Date Signed: