

## CERTIFICATION OF ZERO INCOME

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1.	l the	e following sources:	hereby certify that I do not receive income from ANY of	
	a.	Wages from employment (including commiss	sions, tips, bonuses, fees, etc.);	
	b.	Income from operation of a business;		
	c.	Rental income from real or personal property	<i>r</i> ;	
	d.	Interest or dividends from assets;		
	e.	Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;		
	f.	Unemployment or disability payments;		
	g.	Public assistance payments (TANF, TCA, we	elfare, etc.);	
	h.	. Periodic allowances such as alimony, child support, or gifts received from persons not living in my household;		
	i.	Sales from self-employed resources;		
	j.	ANY bills paid on my behalf, by ANYONE re	siding outside of my household	
	k.	ANY other source not named above.		
	fina	ertify that I currently have <b>no income of any I</b> ancial status or employment status during the ertify that I will be using the following sources		
tru	e ar	• • • • • • • • • • • • • • • • • • • •	y that <b>ALL</b> of the information contained on this document is at making false statements on this document is a <b>FELONY</b> ode and state law.	
ass	sist	ance benefits may result in removal from t	form or any other document used to obtain rental he program and CRIMINAL PROSECUTION.	
Αd	ult	Signature (18 years and older)	Date	