

Head of Household Name	Unit Number

I am a self-employed individual. I am providing the following information and documentation to verify my household income. I certify that the information shown on the attached required items is true and complete to the best of my knowledge.

Name or Type of Business	Year Business Started

Based on my previous and planned self-employment activities, I anticipate my income for the next 12 months will be \$_____.

Please choose and complete one of the following options.

□ I have filed federal income tax returns as a self-employed person. The following documents must be attached:

- Copy of my 20_____ federal income tax returns as filed with the IRS
- Year-to-date profit and loss statement
- Business plan summary (business type, date business started, frequency of work, frequency of payment, and typical payment amounts)
- □ I have not yet filed or am not required to file federal income tax returns as a self-employed person. The following documents must be attached.
 - Annual profit and loss statement for the previous year
 - Year-to-date profit and loss statement
 - Copies of payments/checks received from customers or ledger cards, if available
 - Business plan summary (business type, date business started, frequency of work, frequency of payment, and typical payment amounts)

If forms are completed electronically, one of the following boxes must be checked:

□ This form was completed electronically by the resident.

□ Management or someone outside of the household assisted with completing the form electronically (Authorization to Assist attached).

signature

Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction.

Applicant/Resident Name

Date

Signature of Applicant/Resident