

# STATEMENT OF NO INCOME

Eaton Agency 1-888-608-1541

Patrick Eaton - License# 6624853

## Only check boxes that apply to your current circumstances:

- ☐ The last time that I was employed was on \_\_\_\_/\_\_\_\_/\_\_\_\_.
- ☐ My last employer was \_\_\_\_\_.
- ☐ I certify that I currently have **no income** from employment at this time including self-employment income, and I do not have a prospect or promise of a job.
- ☐ I certify that I currently have **no income** from unearned income such as unemployment, social security, retirement from work, or other sources, VA, SSI, disability benefits, etc.
- ☐ I will report changes that occur that differ from what I have reported on my application.
- ☐ Other.

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I am signing this under penalty of perjury which means I have provided true answers to all the questions on this form to the best of my knowledge. I know that I may be subject to penalties under federal law if I provide false or untrue information.

I know that I must tell the Department of Human Services (DHS) if anything changes (and is different than) what I declared on my application. I can call 1-855-372-1084 to report changes or contact a DHS county office. I understand that a change in my information could affect the eligibility for members of my household.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Social Security#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_