

(Use this form only if you have no income)

Documentation of No Family Income

I, _____ being aware of the financial situation of _____
(Full name of person providing information) (Parent/Guardian Name of Child Applying)

Do hereby attest that this family does not have any source of income known to me at this point and time.

In addition, I provide the following for the family due to their inadequate economic status:

- I do not provide any type of support, I just am aware of their financial situation.
- I provide room and board for this family
- I only provide housing for this family
- I provide financial support for this family in the amount of \$ _____
 - daily
 - weekly
 - monthly

Printed name of person providing information: _____

Mailing Address _____

Phone Number _____ Date Signed _____

Signature: _____

I agree that the above information is correct.

Signature of Parent applying child: _____