



No Income Declaration Form

I, _____, hereby declare that I do not receive any income from any of the following sources:

- 1. Wages from employment (including commissions, tips, bonuses, fees, etc.)
2. Income from operation of a business
3. Rental income from real or personal property
4. Interest or dividends from assets
5. Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits
6. Unemployment or disability payments
7. Periodic allowances such as alimony, child support, or gifts received from person not living in the household
8. Sales form self-employment resources
9. Any other source not named

I have been meeting my basic living needs for food, shelter, and utilities in the following ways:

Food: _____

Shelter: _____

Utilities: _____

*If these needs are taken care of by a friend/relative, please include their first and last name, contact information, and a written/typed notice signed by them stating they take care of these needs if applicable.

I certify that the information contained above is true, complete and accurate to the best of any knowledge. I understand that I am signing this statement under penalty of prosecution if I knowingly give false information which results in assistance received, for which I am ineligible.

I understand this agreement will last 30 days to a year depending on my assistance classification, at which time, I will be required to renew.

Signature _____ Date _____ Time _____

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