Household Member Name: ______________________________________

I certify the following:

1. I am currently unemployed and am not receiving income (earned or unearned).

2. I do NOT receive income from any of the following sources:
   a. Wages from employment (including commissions, tips, bonuses, fees, etc.);
   b. Income from the operation of a business;
   c. Rental income from real or personal property;
   d. Unemployment or disability payments;
   e. Public assistance payments;
   f. Periodic allowances such as alimony or child support;
   g. Social Security payments, annuities, insurance policies, retirement funds, pension, or death benefits;
   h. Veteran’s Benefits;
   i. Supplemental Security Income;
   j. Contracted income (Uber, LYFT, Door Dash, Grub Hub, etc.);
   k. Regular payments (employment and non-employment) received through payment services (Venmo, Cash App, etc.);
   l. Any other source not named above.

Under penalty of perjury, I certify the information presented above is true and accurate. I understand that providing false representations herein may constitute an act of fraud. I acknowledge the information provided is being used for the specific purpose of determining my household’s eligibility to receive assistance through the FTHB HOME program. I will cooperate fully with the lender or KHRC, as applicable, to provide or obtain any necessary documents to confirm the information I have provided.

There is no imminent change expected in my income during the next 12 months.

Blue Ink or e-signature:

______________________________________         ________________________
Household Member Signature    Date