



PEOPLE ACTING IN COMMUNITY ENDEAVORS
For Brighter Futures

**HOME ENERGY ASSISTANCE PROGRAM (HEAP)
ODD JOBS INCOME STATEMENT**

Applicant Name: _____ Application #: _____

I, _____, certify under the penalties of perjury that the following is a true and complete accounting of my income from odd jobs for the period from: ____/____/____ to ____/____/____. I further understand that P.A.C.E., Inc Fuel Assistance may request, at any time, a copy of my income tax return or bank statements to verify my income and I will be held liable if I have misstated or understated my income in any way.

Week Ending	Job(s) Performed	Name and Address of Person for Whom Work Was Performed	Gross Payment Received
		Name: _____ Address: _____	
		Name: _____ Address: _____	
		Name: _____ Address: _____	
		Name: _____ Address: _____	
		Name: _____ Address: _____	
		Name: _____ Address: _____	

Applicant's Signature: _____ Date: _____