

Pokagon Band of Potawatomi Indians



SOCIAL SERVICES DEPARTMENT
P.O. Box 180, Dowagiac, MI 49047

Telephone 269-782-8998 or 1-800-517-0777
FAX 269-782-4295

Zero Income Form

To determine your eligibility for any Programs at the Pokagon Social Services Department or Commodities, you must furnish proof of all household income for the past 30 days prior to the date of your application.

If you had "0" income for the past 30 days, you must answer the following:

- 1) What was your income for the past three months? (Amount and source of income for all household members.)

<u>(Name)</u>	<u>(Source of Income)</u>	<u>(Amount)</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

2) If you have utility bills, how do you pay them? _____

3) How do you pay your rent? _____

4) How do you supply food for your household? _____

I hereby certify that the information I have provided accurately represents the total income for each member of my household.

Signature

Date