

## **Income Verification Form**

Larry Greene

Signature					Date			
X								
declare, under	penalty of perjury, that the inf	formation on this ap	pplica	ation is true a	and correct.			
consent for this	n on this application will be use s information to be shared wit mento Metropolitan Air Qualit	h other offices of t	he Fe	deral, State,	and County G	overnments		
	ON AND SIGNATURE							
	e attached income docun	nentation for ex	very	one living	in my hom	e		
	income statements. The docum	•	_	•	<b>~ 1</b>			
	<b>CUMENTATION</b> The popy of your income documentating the population of the populatio	ion for everyone livi	ng in	your residen	ce, including pa	y stub,		
INCOME DO	CUMENTATION							
\$				5+ Members	Click here	Click here		
Total Monthly Household Income (Gross):				5	\$4,454.59	\$53,455.08		
Unemploym	ent Benefits	• Settlements		4	\$3,840.17	\$46,082.04		
	yments • Pensions	• Spousal Suppor	rt	3	\$3,225.74	\$38,708.88		
Interest Inco	J. , ,	Child Support		2	\$2,611.31	\$ 31,335.72		
• Wages • Workers Compensation • TANF (AFDC)				1	\$1,996.89	\$23,962.68		
from whatever source derived (taxable or non-taxable), including but not limited to:				Persons in Household	Monthly Income	Annual Income		
Household income includes money from all household members,				Eligibility Guidelines				
HOUSEHOLI	DINCOME							
in	cluding adults and children	n under 18.						
N	umber of people living in y	your home,		Sacramento	), CA 95814			
					eet 3rd Floor			
					Metropolitan A	AQMD		
ty	State	Zip	along with your income documentation to:					
					4. Sign and date the application, then mail it			
Mailing Address			Attach a copy of your income documentation.					
		<ol><li>Enter the total monthly income for your household.</li></ol>						
st Name	First Name		Enter the number of people living in your home.					
			1					
				H	low to Apply			