EARLY LEARNING COALITION of SEMINOLE

Self-Employment Income Packet

I, _____, certify under the penalty of perjury (a first-degree misdemeanor punishable by a definite term of imprisonment, not exceeding one year and/or a fine not exceeding $1,000 pursuant to s.837.012, or 775.082, or 775.083, F.S.) the self-employment information and documentation provided is true and complete to the best of my knowledge. I am aware that if I knowingly provide false information, I will be reported to the Department of Law Enforcement Division of Public Assistance Fraud. I may be required to pay back financial assistance received for the above child from the county or state if the child is determined ineligible.

I am aware that I must also provide the following documents **in addition** to Four Weekly Self-Employment Income Logs:

- Current Year's Business License
- Current Year's Occupational License, (if applicable)
- Previous Year's IRS Tax Return Transcript
- Two months business bank statements
- Business Receipts attached to Weekly Self-Employment Logs (if applicable).

Please note, the ELC of Seminole reserves the right to request additional documents to determine eligibility.

The following must be completed in the presence of a Notary

STATE OF FLORIDA, County of _____

Sworn to (or affirmed) and subscribed before me this _____day of_____,20_____, by

_____.
Name of person making statement

_____ _____
Notary Seal *Signature of Notary Public-State of Florida*

☐ Personally Known, -OR-
☐ Produced Identification
Type of ID Produced: _____