

STATEMENT OF NO INCOME

Date	
Name	
FEMA No	
Disaster No.	4611
Damaged Property Address	
Telephone Number	

To Whom it May Concern:

I, _____, am a member or the head of household and, as of this date, I currently do not receive any income from any source.

I hereby declare under penalty of perjury that the foregoing is true and correct. This is submitted pursuant to 28 U.S.C. §1746.

Signature: _____ Date: _____

Printed Name: _____