YUROK TRIBE CLIENT SERVICES DEPARTMENT

190 Klamath Boulevard • Post Office Box 1027 • Klamath, CA 95548

Phone: 855-55-YUROK



Income / Zero Income Form

In determining your eligibility for the Food Distribution Program, you must provide proof of income for the 30 days prior to the date of application. If you had zero income for the past 30 days, you must complete and answer the following questions.

Applicant Name	
	Tribal ID#
1. What was the total income for your h	nousehold for the last 30 days?
2. How do you pay your utility bills?	
3. How do you pay your rent?	
4. How do you get food for your househ	old?
5. Have you asked for a loan or help fro	m friends and/or family?
6. Are you looking for work? Yes No_ 7. Have you applied for Public Assistan 8. If you are residing with others (such a eat your food separately? Yes No I certify that all information is true and that Yurok Tribe Client Services Depart Development Department or other necessity.	ce or General Assistance? Yes No as family or friends), do you purchase, prepare and correct to the best of my knowledge. I am also aware ment may verify my status with the Employment sessary agencies. I acknowledge that such and that falsifying of this information shall be grounds
•	Date
OFFICE USE ONLY	
Staff Signature	Date