



CERTIFICATION BY FAMILY MEMBER

Name Head of Household _____

I, _____ hereby certify that I am not employed or receiving income of any kind. If I should receive income of any kind in the future, I shall report it to RCAP Solutions, **within 30 days of the change.**

Signed Under the Pains and Penalties of Perjury.

Signature

Date

WARNING - Section 1001 of Title 18 of the U. S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of The United States as to matters within it's jurisdiction.