HOME ENERGY ASSISTANCE PROGRAM (HEAP)

ODD JOB INCOME WORKSHEET

CAA Name:	Downeast Community Partners	**CAA Phone:**	(207) 610-5914
CAA Address:	248 Bucksport Road	**CAA Fax:**	(207) 664-2430
	Ellsworth,ME 04605	**CAA Email:**	Heap@downeastcommunitypartners

Applicant Name:	_____	**Date of Application:**	_____
Physical Address:	_____	**Application ID#:**	_____
City State Zip:	_____		

I, the above-named Applicant, certify under the penalties of perjury that the following is a true and complete accounting of my income from odd jobs for the period from: _____ to _____. I further understand that the CAA or MaineHousing may request, at any time, a copy of my income tax return to verify my income. If I have knowingly given false, misleading or incomplete information, I understand I may be subject to criminal prosecution, liable to MaineHousing for repayment of any benefits received, and/or risking my future eligibility for benefits.

Name of person for whom work was performed	Job(s) Performed	Month Paid	Payment Received
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$
			$

Applicant Signature _____ Date _____