

**ARIZONA DEPARTMENT
OF ECONOMIC SECURITY
Family Assistance
Administration**

**SELF-EMPLOYMENT
INCOME STATEMENT**

Name (*Last, First, M.I.*):

Business Start Date:

Case Number:

**See pages 15-20
for USDA/EOE/ADA
disclosures**

APP ID:

What type of business is this? _____

Do you file taxes?

Yes

No

Business Name:

Business Address:

When additional space is needed attach a separate sheet of paper.

MONTH/YEAR:		
Date:	Income:	Hours:
Date:	Expense Type:	Expense Amount:

MONTH/YEAR:		
Date:	Income:	Hours:
Date:	Expense Type:	Expense Amount:

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Date:	Income:	Hours:
Date:	Expense Type:	Expense Amount:

Print Name:

Signature: _____

Date: _____

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender

identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should

contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at

<https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>,
from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights

violation. The completed AD-3027 form or letter must be submitted to:

1. mail:

**Food and Nutrition
Service, USDA
1320 Braddock Place,
Room 334
Alexandria, VA
22314; or**

2. fax:

**(833) 256-1665 or
(202) 690-7442; or**

3. email:

**[FNSCIVILRIGHTS
COMPLAINTS
@usda.gov](mailto:FNSCIVILRIGHTS.COMPLAINTS@usda.gov)**

This institution is an equal opportunity provider.

To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Disponible en español en línea o en la oficina local.