



# Community Action Wayne/Medina

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## Appendix VII: Self-Employment Income and Expense Form

### Self-Employment Income and Expense Form

**Failure to complete all sections below may delay the processing of your application.**

Examples of self-employment include owning your own business, babysitting, daycare, home party sales, landlord, odd jobs, rideshare drivers, Ohio Electronic Child Care, selling items on eBay or similar platform, etc.

If you do not file a Form 1040 with the IRS, you must provide an IRS Verification of Non-Filing Letter, along with this completed form.

Name of Self-Employed Person: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

| Itemized Business Income                       |        |        | Itemized Business Expenses |        |        |
|------------------------------------------------|--------|--------|----------------------------|--------|--------|
| Date                                           | Source | Amount | Date                       | Source | Amount |
|                                                |        |        |                            |        |        |
|                                                |        |        |                            |        |        |
|                                                |        |        |                            |        |        |
|                                                |        |        |                            |        |        |
|                                                |        |        |                            |        |        |
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|                                                |        |        |                            |        |        |
|                                                |        |        |                            |        |        |
|                                                |        |        |                            |        |        |
| 12-month Income Total:                         |        |        | 12-Month Expense Total:    |        |        |
| Total Business Income (Income minus Expenses): |        |        |                            |        |        |

Attach additional pages as necessary.

I certify under penalty of perjury, that this income and expenditure information is true and correct to the best of my knowledge.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_