

CERTIFICATION OF ZERO INCOME

- 1. I hereby certify that I do not individually receive income from any of the following sources:
- a. Wages from employment (including commissions, tips, bonuses, fees, etc);
- b. Income from operation of a business;
- c. Rental income from real or personal property;
- d. Interest or dividends from assets;
- e. Social Security or Disability payments, annuities, insurance policies, retirement funds, pensions, or death benefits;
- f. Unemployment payments;
- g. Periodic allowances such as alimony, child support, or gifts received from persons not living in my household;
- h. Sales from self-employment resources (Avon, Mary Kay, Shaklee, etc.,);
- i. Any other income source not named above : _____

2. I currently have no income of any kind and there is not imminent change expected in my financial status or employment status during the next _____ months.

Under penalty or perjury, I certify that the information I have presented in this certification is true and accurate to the best of my knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Signature of Applicant

Printed Name of Applicant

Date

STATE OF MISSOURI)) COUNTY OF GREENE)

On this day of	, 2013 before personally
appeared	, to me
known to be the perso	n or persons described in and who executed the foregoing
instrument, and ackno	wledged that he/she executed the same as he/she free act and
deed, as Borrower.	

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal in the City of Springfield, County of Greene, and State aforesaid, the day and year first above written.

NOTARY PUBLIC

My term expires: