

**THE DEPARTMENT OF EARLY EDUCATION AND CARE  
SUBSIDIZED CHILD CARE  
HOUSEHOLD INCOME STATEMENT**

*Please read carefully and mark "X" to all that apply. You may be asked to provide documentation of income.*

I certify under penalty of perjury that the information below is correct and complete to the best of my knowledge. Providing inaccurate details about my household income will lead to the conclusion that I provided false or misleading information. I understand that providing false or misleading information to my child care Subsidy Administrator and the Massachusetts Department of Early Education and Care (EEC) may result in the immediate termination of my child care subsidy. I also understand that EEC may require that I repay any improper payments for child care financial assistance that I received after I provided false or misleading information.

**I AM CURRENTLY RECEIVING (COMPLETE ALL THAT APPLY - DO NOT LEAVE LINES BLANK, PUT A ZERO IN IF IT DOES NOT APPLY):**

Type of Income	Parent #1 Amount	Parent #1 Frequency (Monthly, Weekly, etc)	Parent #2 Amount	Parent #2 Frequency (Monthly, Weekly, etc)
Earnings from Employment	\$ _____	_____	\$ _____	_____
Tips Earned	\$ _____	_____	\$ _____	_____
Business Income	\$ _____	_____	\$ _____	_____
Commission	\$ _____	_____	\$ _____	_____
Child Support	\$ _____	_____	\$ _____	_____
Alimony	\$ _____	_____	\$ _____	_____
TAFDC (NOT SNAP Benefits)	\$ _____	_____	\$ _____	_____
DTA Transitional Stipends	\$ _____	_____	\$ _____	_____
Rental Income	\$ _____	_____	\$ _____	_____
SSI / SSDI	\$ _____	_____	\$ _____	_____
Unemployment Compensation	\$ _____	_____	\$ _____	_____
Workers' Compensation	\$ _____	_____	\$ _____	_____
Veteran's Benefits (i.e. retirement, disability, etc.)	\$ _____	_____	\$ _____	_____
Dividends or Income from Trusts/Estates	\$ _____	_____	\$ _____	_____
Other _____	\$ _____	_____	\$ _____	_____

**I RECEIVE IN-KIND SUPPORT.** In-kind support can include receiving money from the non-custodial parent for things like: diapers, food, gas, payment of a bill or mortgage, informal alimony, or other forms of support. In-Kind support **does not** include payments made through DOR or the Courts.

The estimated value of this support is: \$ \_\_\_\_\_

I receive this support (circle one):      *Annually*    *Monthly*    *Weekly*    *Irregularly*

**If You are NOT Receiving ANY Support:**

- I have a court order for child support, however, I am not receiving support at this time.
- I have a court order for alimony, however, I am not receiving support at this time.
- I am **NOT** receiving any alimony, spousal, child support or other compensation FROM ANY COURT ORDER OR OTHER AGREEMENT. I do not receive support from any source at this time, including in-kind support.

\_\_\_\_\_ (Initial) I certify that my household does not have assets with a combined value of more than \$1 million. Assets are valuables including, but not limited to, all houses or other buildings, real property, vehicles, cash, bank accounts, cash value of life insurance policies, trusts, stocks, bonds, and overall business value, including equipment, jewelry, livestock, or other goods.

\_\_\_\_\_

Print Parent Name

\_\_\_\_\_

Social Security Number

\_\_\_\_\_

Signature

\_\_\_\_\_

Date