

**Hillsborough County Sunshine Line**  
**Income Certification Form**

Name \_\_\_\_\_

Social Security Number or Client ID \_\_\_\_\_

Phone # for follow-up \_\_\_\_\_

Please check all that apply and complete the information below

I do not have any income of any kind.

I receive \$ \_\_\_\_\_ paid to me in cash from \_\_\_\_\_

By signing this certification I am stating that this information is true and complete. I understand that withholding information or giving false information may result in denial of service.

Signature \_\_\_\_\_

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

Name and Signature of person preparing form if not applicant:

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

**Please mail form to the address below:**

**Hillsborough County Sunshine Line**  
**2709 E Hanna Avenue**  
**Tampa FL 33610**