

PO Box 453220 Grove, Oklahoma 74345 P: 918-787-5452 Ext. 101 or 103

STATE OF			
COUNTY OF			
	INCOME STATEMENT VERIFI	CATION FOR	RM
TO WHOM IT	MAY CONCERN:		
I,	, am self employ	ed. My incom	e last month was
\$	I expect to be making (within \$100	plus or minus)
\$	per month, this quarter.		
My schedule	that I work is (example: M-F):		days a week
and the hour	s I work are (Example 8:00 – 5:00) a w	veek:	
			AFFIANT
Subscribed a	and sworn to before me on this _	day	of
		Notary Public	
Imprint Seal My Commiss	Here ion Expires:		
1001 CTATE	MENTS OF ENTRIES CENERALLY		

1001. STATEMENTS OF ENTRIES GENERALLY

Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious, or fraudulent statements or representations, or makes or uses any false writing or documents knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisonment not more than five years or both.