



Economic and Social Services (ESS)

Low Income Home Energy Assistance Program (LIHEAP)

Contribution Statement

I, _____, residing at _____
attest, under penalty of perjury, that I assist _____ with
living expenses in the amount of \$ _____ monthly.

Under penalty of perjury, I declare that I have provided factual information to the best of my knowledge. I understand that willfully making a false statement in this document is perjury and, if convicted, I shall be punished accordingly.

Printed Name

Phone Number

Signature

Date

Sworn to and subscribed before me on this _____ day of _____
20____.

Notary of the Public
State of: _____

My Commission Expires

County of: _____

Personally Known: _____

Seal:

Identification Provided: _____