

Wyandotte Nation

64790 East Highway 60 Wyandotte OK 74370-2098 Phone: (918) 678-3268 – FAX: (918) 678-3087 wyandotte-nation.org



P.L. 102-477 Services Program ~ Self-Employment Verification¹

I,(Applicant's Name)	, hereby verify that I am self-employed.		
Type of Business:			
Applicant's Address:			
(City)	(State)	(Zip)	
My work schedule as a self-employee is:			
My monthly income last month as a self-emp	ployee was:		
My projected income for the upcoming mon	th will be:		

(Applicant's Printed Name)

(Applicant's Signature)

Sworn to and subscribed to me this		day of		, 20
{	}		(Notary Public Signature	2)
C	J		(Commission Expiration E	Date)

 $^{^{\}mbox{\scriptsize 1}}$ This form must be completed in the presence of a Commissioned Notary Public.