

PARENT'S STATEMENT OF MONEY RECEIVED OR BILLS PAID ON BEHALF OF:

Parent's Name _____

Social Security # _____

Type of expense	Amount:	Number of months paid:	Total for 2020 year:
Rent/House payment			
Electricity			
Water/Sewage			
Telephone			
Other Utilities			
Food (Do not include food stamp purchases)			
Clothing			
Car payment (on student's vehicle)			
Car insurance (on student's vehicle)			
Miscellaneous expenses			
Type:			
Total Paid:			

Divide the above number by number of people in the household: _____

Total amount paid on your behalf and cash received: _____

I, _____, certify that I paid the above bills on behalf of _____ (*Parent's Name*).

Signature _____
(Person paying the bills)

Date _____

Student's Name: _____

Student's Social Security Number: _____