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

Student's Name			Social Security #
Type of expense	Amount:	Number of months paid:	Total for 2021 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	(Student's Name).	
Signature(Person paying the bills)	Date	