



County Indigent Health Care Program (CIHCP)  
**Statement of Self-Employment Income**

Case Record Name	Case Record No.
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**See Page 2 for instructions and additional information.**

1. Name of the person who has self-employment income: \_\_\_\_\_
2. Give the number of months covered by this income statement: \_\_\_\_\_
3. Describe what you did to earn this money:

4. List your business expenses and income. **Important: Attach receipts, invoices or other verifying papers.**

Date	Expenses	Amount
Total Expenses		

Date	Income	Amount
Total Income		
Subtract Expenses –		
<b>Net Self-Employment Income</b>		

The above information is true, correct and complete to the best of my knowledge. I understand that giving false information to the county could result in my being disqualified for fraud.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Person Helping Complete Form, if Applicable \_\_\_\_\_ Date \_\_\_\_\_

If you or any member of your household has any kind of self-employment income, fill out this form and attach it to your application. You may attach a copy of the latest income tax forms in place of this form. If your accounting system is not the same as this form, you may substitute a copy of your accounting statement. You must answer all questions and sign and date the bottom of Page 1. **Use additional sheets of paper if you need to.** Sign and date each additional sheet. This is your sworn statement. When you have your interview, you will need to bring bills, receipts, checks or stubs, and any other business records you have as your worker will need to see them. **Your records will be returned to you.**

**Self-employment income** is any money you earn working for yourself. It is not money you earn working for someone else. If you are in doubt, ask your caseworker.

**Questions 1, 2 and 3.** These questions are self-explanatory.

**Question 4.** List your business income and expenses. In the boxes on the left side of Page 1, list your business **expenses** (see the information below). Enter the dates you paid the expenses and the amount of each expense. Add the amounts and enter your total in the box "Total Expenses." In the boxes on the right side of Page 1, list your income (see the information below). List the dates you received the income, your sources of income, and the amounts. Add the amounts and enter your total in the box "Subtotal." Under the "Subtotal" box, enter your total expenses. Subtract your total expenses from the Subtotal and enter your "Net Self-Employment Income."

**Expenses** are your costs of doing business. Examples are supplies, repairs, rent, utilities, seed, feed, business insurance, licenses, fees, payments on principal of loans for income-producing property, capital asset purchases (such as real property, equipment, machinery, and other durable goods and capital asset improvements), your Social Security contribution for people who worked for you, and labor (not salaries you pay yourself). If you claim labor costs, list each person and the amount you paid them. If you have any other kinds of business expenses, list them and the date they were paid.

You may not claim:

- Rent, mortgage, taxes or utilities on your business if it operates out of your home (unless these costs are separate from the costs of your home);
- Cost of goods you buy for the business but use yourself;
- Net business loss from a prior period; and
- Depreciation.

If you are in doubt, bring proof of the expense and ask your caseworker.

**Income** includes money from sales, cash receipts, crops, commissions, leases, fees, or whatever you do or sell for money. If you have any other kind of income from your business, list that income and the dates that income was received.

**Who must sign.** The form must be signed by the applicant, spouse or authorized representative. Any person may help you complete the form, but that person must also sign and date the form. Ask your caseworker if anyone else needs to sign the form.

**With a few exceptions, you have the right to request and be informed about the information that the county obtains about you. You are entitled to receive and review the information upon request. You also have the right to ask the county to correct information that is determined to be incorrect (Government Code, Sections 552.021, 552.023, 559.004). To find out about your information and your right to request correction, please contact your local county office.**