



NORTH FORK RANCHERIA TRIBAL TANF

STATEMENT OF FACTS

I, _____, make the following statement:

I hereby grant permission to North Fork Rancheria Tribal TANF to investigate and verify the above information provided by me to determine eligibility.

Under penalty of perjury, I certify that the above information is true and correct to the best of my knowledge and belief.

I understand that knowingly providing false information to obtain Tribal TANF services may constitute a criminal offense and/or fraud, disqualifying me for North Fork Rancheria Tribal TANF and/ or resulting in an overpayment that I may be required to reimburse North Fork Rancheria Tribal TANF.

Applicant/Client Signature

Date

NFRTT Staff

Date