



## Child Care Services (CCS) Self-Employment Packet

### **SECTION I: BUSINESS INFORMATION**

TWIST ID:	Name of owner:
Name of business:	Type of business:
Start date of business:	Business phone:

Print name, sign, date, and include TWIST ID on all Business Income Statements.

### **SECTION II: SELF-EMPLOYMENT OVERVIEW**

**Background:** CCS families are responsible for providing sufficient documentation to CCS for eligibility determination. CCS will use your adjusted business income for eligibility purposes. Your adjusted business income is your net income after business expenses are deducted. In order for an expense to be deductible, the business expense must be both ordinary and necessary.

**Work Hours:** If CCS staff cannot calculate the hours worked per week based on the information provided, the net income will be divided by the current minimum wage hourly rate to determine eligibility. Example: If you earn \$100 per week, that amount will be divided by \$7.25 (\$100/\$7.25=13.79 hours).

**Business Records:** Attach clear and legible business records that support the information reported.

To verify your business, please provide one of the following:

- Current property titles, deeds, tax records, or rental agreement for the place of business
- Recent business bank statement
- Recent business phone, utility, or insurance bill
- Recent state sales tax return
- Recent business records that provide proof of income and expenditures, such as copies of money orders/checks received and list of individuals/customers served (if applicable) or personal wage records with third party signed verification
- Current business registration or license (i.e., DBA license or professional license)

To verify your gross business income, please provide one of the following:

- Most recent IRS Form 1040 with Schedule C, F, or SE federal income tax returns
- Most recent IRS Tax Transcript
- Most recent statement of profit/loss
- Most recent three months of business bank statements
- Copies of money orders or check received
- Most recent 3 months of invoices or lists of customers served with dates and identifying information (such as addresses)
- Personal receipt books of business activity and income
- Personal payment records with 3rd party signed verification

**Fraud:** Providing false documents for eligibility purposes is considered fraud and will result in termination and/or denial of services. All suspected fraud will be investigated and is subject to criminal prosecution.

**SECTION III: GROSS INCOME AND EXPENSES**

You may choose to deduct a standard amount instead of itemizing expenses.

**Note:** Business expense receipts are required **only** if itemizing expenses.

Please select one:     Itemized expenses     Standard deduction (30% of gross income)

<b>Weekly Gross Income</b>						
Payment amount you received for goods or services						
Week #	Week ending date	Total Weekly Gross Income		Week #	Week ending date	Total Weekly Gross Income
1				8		
2				9		
3				10		
4				11		
5				12		
6				13		
7						

**If itemizing expenses**, please complete the following:

<b>Weekly Expenses</b>						
Business Expenses include Rent, Telephone, Utilities, Supplies, Gas, Booth Rental, Payroll, etc.						
Week #	Week ending date	Total Weekly Expenses		Week #	Week ending date	Total Weekly Expenses
1				8		
2				9		
3				10		
4				11		
5				12		
6				13		
7						

*Note: The following calculations may be completed by the customer or CCS Representative.*

Average weekly amount: add the gross income from each week together and divide total by 13.

Average monthly amount: multiply average weekly amount (calculation above) by 4.33

Average Monthly Gross Income (before deductions)		\$
Subtract Deductions		
Standard: Average Monthly Gross Income *.30		\$
Itemized: Average Monthly Itemized Amount	-	
Adjusted Monthly Gross Income		\$

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

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date