CHILD CARE and DEVELOPMENT FUND (CCDF) VOUCHER PROGRAM NAME ATTESTATION (v5-12)

Individual's Name:	_ 🗆 Applicant	Co-Applicant
The name above should be recorded as it appears on the CCDF A	Application (State	Form 805)
is also known as:		
List any other names, including those on documents provided, the Applicant or Co-Applicant is using or has used.		
		_(Printed Name)
		_(Printed Name)
		_ (Printed Name)
and that all names listed above are the same person.		

I hereby affirm, under the penalties of perjury, I am the above named individual and I have personally prepared the foregoing statement for myself and the same is true to the best of my knowledge and belief.

Signature of Individual: _____ Date: _____

NOTE: This document shall be used when the Applicant or Co-Applicant's name does not match all sources of verification information provided to the Intake Agent.