
Excluded New Jerseyans Fund – Nonprofit’s Attestation for Applicant’s Income

If you are unable to submit other required documentation demonstration income, a nonprofit organization that has provided services to you may be able to send a letter to support your application for the Excluded New Jerseyans Fund. This letter must come from a service providing nonprofit, not the applicant. As a reminder, there is no fee required to apply or to obtain assistance for the Excluded New Jerseyans Fund.

Si no puede presentar otra documentación requerida que demuestre sus ingresos, una organización sin fines de lucro que le haya prestado servicios, puede enviar una carta para respaldar su solicitud del Fondo para Residentes de NJ Excluidos. Esta carta debe provenir de una organización sin fines de lucro que preste servicios, no del solicitante. Como recordatorio, no se requiere ningún pago para solicitar u obtener ayuda para el Fondo para Residentes de NJ Excluidos. Instrucciones para la organización están aquí.

Attesting Organization Instructions – This letter must be on the letterhead and signed by a nonprofit, 501c3 organization that is providing services to the applicant. You may draft your own letter or use the template below. The letter should also include:

- Name of nonprofit’s staff writing the letter, signed by nonprofit staff
- Name of applicant(s)
- Attestation that the applicant(s) is receiving services from the nonprofit organization
- Type of services or support provided to applicant and when (housing, food, legal, social services, etc.)
- Attestation of applicant(s)’ annual household income
- Acknowledgment that this program is paid with federal funds and that it is unlawful to provide any false or misleading information to receive these benefits.

Template

<<< ORGANIZATION LETTERHEAD >>>

To whom it may concern:

I’m writing on behalf of _____ (Applicant(s)’ name) in support of their Excluded New Jerseyans Fund application. The applicant has been receiving the following services _____ from our organization since _____. Based on our support of this applicant we can attest that the applicants’ annual household income is _____.

I acknowledge that this program is paid through federal funds and that it is unlawful to provide any false or misleading information to receive these benefits.

Best,

Name

Title

Organization

Phone/Email