



PR-PUA-2 Rev. 06/20

Received by:

## DECLARATION OF EMPLOYMENT AND WAGES FOR PANDEMIC UNEMPLOYMENT ASSISTANCE (PUA) COVID-19 FOR THE SELF-EMPLOYED (ONLY USE THIS FORM IF YOU DO NOT HAVE EVIDENCE OF PRIOR INCOME)

I understand that my eligibility to receive Pandemic Unemployment Assistance (PUA) Covid-19 will be determined based on the information provided to the Bureau of Employment Security in this statement, because there is no trustworthy registry of insured employment or self-employment and wages. I also understand that in order to determine my weekly income, I must submit a reasonable explanation of what my net income would have been for the fiscal year when the COVID-19 pandemic occurred. I understand that all projections regarding net income or loss of income are subject to verification as soon as I submit a copy of any missing income tax return for the current and previous taxable year.

The following information about net income is submitted for the consideration of my eligibility to receive Pandemic Unemployment Assistance (PUA) Covid-19:

	Previous Year	Current Year
Gross Income, if applicable Subsidies, if applicable Sub-total Minus Business Expenses Net Income	\$\$ \$\$ \$\$	\$\$ \$ _ \$ _ \$
· · · · · · · · · · · · · · · · · · ·	oy of my income tax return for the taxable	e year () prior to the date of the COVID-
My projected or estimated net inco to my earning capacity as a self-em	• • • • • • • • • • • • • • • • • • • •	, is based on the following information related
I estimate my income to	be: [ ] increased [ ] decrea	ased, for the current year because
At the time of the pandemic, [ ] I	was [ ] I was not carrying out tasks rela	ated to my self-employment.
The average weekly hours working	in self-employment are:	·
of obtaining Pandemic Unemployr penalties, including criminal charg	ment Assistance for COVID-19. I am aw	s correct. I have volunteered it for the purpose vare that the law provides civil and criminal ormation, or false representations, or hiding am not entitled.
Claimant's Signature	Social Security Number	Date (month/day/year)