

## Poverty Exemption Checklist #2

### **INCOME OR BENEFITS RECEIVED FOR EACH MEMBER OF HOUSEHOLD**

In the boxes below, write the names of each member in your household. Fill in what income source each member has.

**\*A copy of each source of income marked should be provided with the application.**

<b>YOU</b>	<b>MEMBER 1</b>	<b>MEMBER 2</b>	<b>MEMBER 3</b>	<b>MEMBER 4</b>
<u>NAME:</u>				
RELATIONSHIP TO YOU:				
AMOUNT PAID TOWARDS RENT or OTHER EXPENSES:				
<input type="checkbox"/> Employment <input type="checkbox"/> Unemployment <input type="checkbox"/> Alimony/Child Support <input type="checkbox"/> Social Security <input type="checkbox"/> SSI <input type="checkbox"/> Veterans Payments <input type="checkbox"/> Disability <input type="checkbox"/> Pension <input type="checkbox"/> IRA's or 401K's <input type="checkbox"/> Insurance Policy <input type="checkbox"/> Annuity <input type="checkbox"/> Inheritance <input type="checkbox"/> Rental Income <input type="checkbox"/> Food Stamps <input type="checkbox"/> Educational Aid <input type="checkbox"/> Other Income <input type="checkbox"/> NO INCOME	<input type="checkbox"/> Employment <input type="checkbox"/> Unemployment <input type="checkbox"/> Alimony/Child Support <input type="checkbox"/> Social Security <input type="checkbox"/> SSI <input type="checkbox"/> Veterans Payments <input type="checkbox"/> Disability <input type="checkbox"/> Pension <input type="checkbox"/> IRA's or 401K's <input type="checkbox"/> Insurance Policy <input type="checkbox"/> Annuity <input type="checkbox"/> Inheritance <input type="checkbox"/> Rental Income <input type="checkbox"/> Food Stamps <input type="checkbox"/> Educational Aid <input type="checkbox"/> Other Income <input type="checkbox"/> NO INCOME	<input type="checkbox"/> Employment <input type="checkbox"/> Unemployment <input type="checkbox"/> Alimony/Child Support <input type="checkbox"/> Social Security <input type="checkbox"/> SSI <input type="checkbox"/> Veterans Payments <input type="checkbox"/> Disability <input type="checkbox"/> Pension <input type="checkbox"/> IRA's or 401K's <input type="checkbox"/> Insurance Policy <input type="checkbox"/> Annuity <input type="checkbox"/> Inheritance <input type="checkbox"/> Rental Income <input type="checkbox"/> Food Stamps <input type="checkbox"/> Educational Aid <input type="checkbox"/> Other Income <input type="checkbox"/> NO INCOME	<input type="checkbox"/> Employment <input type="checkbox"/> Unemployment <input type="checkbox"/> Alimony/Child Support <input type="checkbox"/> Social Security <input type="checkbox"/> SSI <input type="checkbox"/> Veterans Payments <input type="checkbox"/> Disability <input type="checkbox"/> Pension <input type="checkbox"/> IRA's or 401K's <input type="checkbox"/> Insurance Policy <input type="checkbox"/> Annuity <input type="checkbox"/> Inheritance <input type="checkbox"/> Rental Income <input type="checkbox"/> Food Stamps <input type="checkbox"/> Educational Aid <input type="checkbox"/> Other Income <input type="checkbox"/> NO INCOME	