



| Has anyone received any benefits in another county or state?         | ☐ Yes ☑ No |
|--|------------|
| Where:   |            |
| Is anyone pregnant? *Please provide proof of pregnancy if available. | ☐ Yes ☑ No |
| Due Date:  |            |

| Expense            | Amount | How Often? |
|--------------------|--------|------------|
| Rent/Mortgage      | 300    | Monthly    |
| Property Taxes     |        |            |
| Property Insurance |        |            |
| Electricity        |        |            |
| Gas                | 30     | monthly    |
| Garbage            | 35     | monthly    |
| Telephone          | 20     | monthly    |
| Other              |        |            |