



Division of Family and
Children Services



PeachCare
for Kids®

Application for Benefits

Has anyone received any benefits in another county or state?

☐ Yes ☒ No

Where: _____

When: _____

Is anyone pregnant? *Please provide proof of pregnancy if available.

☐ Yes ☒ No

Due Date: _____

Expense	Amount	How Often?
Rent/Mortgage	600	Monthly
Property Taxes	0	
Property Insurance	0	
Electricity	42	Monthly
Gas	32	Monthly
Garbage	35	Monthly
Telephone	60	Monthly
Other		

Danielle
First Name

E
Middle Initial

Carter
Last Name