

Application ID: 100036342

To: Cmncnoxefl Ugukigrdve 455 S Broadway Ave Boise, ID 83702

Household Contact Information Primary One

Date of birth: Jan 01, 1975

Email: AgeOut.Test20475991@yopmail.com

Phone: 4612378416 / 6809576589

Home address: 818 W Ann Morrison Park Dr, Boise, ID, 83706

Mailing address: 455 S Broadway Ave, Boise, ID, 83702

Preferred Phone Number: 4612378416 (Cell) **Second Phone Number**: 6809576589 (Home)

Preferred Spoken language: English
Preferred Written language: English
Preferred method to read notices: EMAIL

Applying for Coverage

Name	Relationship	Date Of Birth	Seeking Coverage
Primary One	Self	Jan 01, 1975	Yes
Child One	Child (son or daughter)	Feb 15, 2000	Yes

Household Members

Primary One Information

Applying for coverage: Yes **Sex**: male

Social Security Number: ***-2645
Name on SSN card: Primary One

US Citizen Or US National: Yes

Home Address: 818 W Ann Morrison Park Dr, Boise, ID, 83706

Mailing Address: 455 S Broadway Ave, Boise, ID, 83702

Child One Information

Applying for coverage: Yes **Sex**: female

Social Security Number:

Name on SSN card:

US Citizen Or US National: No

Home Address: 818 W Ann Morrison Park Dr, Boise, ID, 83706

Mailing Address: 455 S Broadway Ave, Boise, ID, 83702

More About The Household Members

Is American Indian Or Alaska Native

Primary One No Child One Yes