

MARYLAND DEPARTMENT OF HUMAN SERVICES FAMILY INVESTMENT ADMINISTRATION REQUEST FOR INFORMATION TO VERIFY ELIGIBILITY 1. Local Department	2. DATE	3. CL ID /AU NUMBER
	4.. CASE NAME	
	5. CASE MANAGER	
	6. TELEPHONE NUMBER	

DEAR CUSTOMER: To get benefits you must give us the proofs **MARKED BELOW** for you and **ALL PERSONS FOR WHOM YOU ARE APPLYING**. If you have any questions or need help to get the proofs, please call me. Thank you. DATE:

Bring the proofs to an interview Bring or send them to me no later than...

PROOF OF INCOME Required for all programs. We cannot issue benefits if you do not verify the checked items		PROOF OF IDENTITY Only one PROOF needed for TCA and FSP But more than one may be needed for MA		MOST RECENT PROOF OF EXPENSES Not required but if you provide of these expenses ,you might get more benefits	
Pay stubs – last _____		Social Security Number		Heat, Lights, Telephone, Water, Sewage Trash Removal, Other Utilities	
Statement on Employer's Letterhead		Birth or Baptismal Certificates		* Rent Mortgage Receipts	
Tax Return 20_____		Drivers Licenses		* Amount of Shared Expenses	
Unemployment benefits		Alien Registration cards or alien numbers for:_____		*Child or Adult Dependent Care	
Union/Strike benefits		Marriage License/Divorce Decree		Property Taxes/Homeowners Insurance	
Child support or alimony you receive		Affidavit from another person		Medical Bills	
Social Security Benefits		Citizenship		Child support or alimony you pay to someone outside your home	
SSI/SSDI Benefits		Other		Other	
Veteran's Benefits or Other Pensions		Other		OTHER PROOFS	
Education Loans/Grants/Scholarships		Proof of Living Arrangement		School Attendance and Financial Aid Form 604 or 690	
Military Allotments		1130 form Not to be used for proof of who lives with you.		Address of Absent Parent/s	
*Proof of expenses paid by Others		Other_____		Pregnancy/Prenatal Care	
*Contributions from others		PROOF OF ASSETS (Case manager: Not required for categorical elig FSP)		Disability Incapacitation	
*From Roomers or Boarders		Checking and Savings Accounts		Application for Other Benefits	
Rental/Mortgage Income		Certificates of Deposit (CD's, IRA's and Keogh Accounts)		Proof of Who Lives With You	
Self Employment Records		Stocks, Bonds, Mutual Funds		Report Cards	
Workman's Compensation		Dividends and Interest		Health Care Forms	
Wage Form		Life and Health Insurance		Type of Housing	
Other _____		Other_____			

***IMPORTANT:** These proofs must include the name, address and telephone numbers of the person making the statement. If you need assistance getting these proofs, please let me know.

The Family Investment Administration is committed to providing access, and reasonable accommodation in its services, programs, activities, education and employment for individuals with disabilities. To request a reasonable accommodation for a disability ,please contact the case manager listed above or call 1-800-332-6347.

This institution is an equal opportunity provider.