ACCOUNT NUMBER		ELIGIBLE INDIV	VIDUAL:		
		INCOME SUN	MMARY 2010		
TYPE OF INCOME (e.g.,wages)):		PAYER:		
INCOME RECEIVED BY (NAME AND A/N):			TAKEN FROM (e.g., pay stubs):		
	MAY 2010			JUNE 2010	
S M T W TH F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 MONTHLY TOTALS: YEAR-TO-DATE TOTAL:	GROSS CAFETERIA CHI WAGES PLAN DED. SUF	ILD OTHER PPORT OTHER	S M T W TH F S 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 MONTHLY TOTALS: YEAR-TO-DATE TOTAL:	GROSS CAFETERIA PLAN DED. \$ \$ \$ \$ \$ \$ \$ \$	A CHILD OTHER SUPPORT
JULY 2010			AUGUST 2010		
S M T W TH F S 1 2 3	GROSS CAFETERIA CHI WAGES PLAN DED. SUF	ILD OTHER PPORT —	S M T W TH F S 1 2 3 4 5 6 7	GROSS CAFETERIA WAGES PLAN DED.	

S M T W TH F S	GROSS CAFETERIA CHILD OTHER WAGES PLAN DED. SUPPORT	S M T W TH F S	GROSS CAFETERIA CHILD WAGES PLAN DED. SUPPORT OTHER
1 2 3	\$	1 2 3 4 5 6 7	\$
4 5 6 7 8 9 10		8 9 10 11 12 13 14	
11 12 13 14 15 16 17		15 16 17 18 19 20 21	
18 19 20 21 22 23 24		22 23 24 25 26 27 28	
25 26 27 28 29 30 31		29 30 31	
MONTHLY TOTALS: YEAR-TO-DATE TOTAL:	\$ \$	MONTHLY TOTALS: YEAR-TO-DATE TOTAL:	\$ \$

Social Security Certification: I have personally examined the documents submitted and certify by my signature below, their contents.	All the entries (except monthly totals) are
exact excerpts from those documents.	

Signature:

Date: