

<b>ACCOUNT NUMBER</b>	<b>ELIGIBLE INDIVIDUAL:</b>
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**PERIODIC REPORTING INCOME SUMMARY 2010**

<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**JANUARY 2010**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
					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							_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			

**FEBRUARY 2010**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
	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							_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			

**MARCH 2010**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
	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				_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**APRIL 2010**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
				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		_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			

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**PERIODIC REPORTING INCOME SUMMARY 2010**

<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**MAY 2010**

S M T W TH F S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>	\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>		\$ _____		

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**JUNE 2010**

S M T W TH F S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>	\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>		\$ _____		

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: \_\_\_\_\_

**JULY 2010**

S M T W TH F S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>	\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>		\$ _____		

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AUGUST 2010**

S M T W TH F S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>	\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>		\$ _____		

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>ACCOUNT NUMBER</b>	<b>ELIGIBLE INDIVIDUAL:</b>
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**PERIODIC REPORTING INCOME SUMMARY 2010**

<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**SEPTEMBER 2010**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
			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			_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**OCTOBER 2010**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
					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							_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**NOVEMBER 2010**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
	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					_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**DECEMBER 2010**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
				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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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.										
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**PERIODIC REPORTING INCOME SUMMARY 2011**

<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**JANUARY 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
						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						_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**FEBRUARY 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
		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						_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**MARCH 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
		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			_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**APRIL 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
					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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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**PERIODIC REPORTING INCOME SUMMARY 2011**

<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**MAY 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
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					_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**JUNE 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
			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			_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**JULY 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
					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							_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**AUGUST 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
	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				_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**SEPTEMBER 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
				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		_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**OCTOBER 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
						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						_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**NOVEMBER 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
		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				_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**DECEMBER 2011**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
				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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**JANUARY 2012**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
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					_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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**FEBRUARY 2012**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
			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				_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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Signature: _____							Date: _____			

**MARCH 2012**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
				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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			

**APRIL 2012**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
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						_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			

<b>ACCOUNT NUMBER</b>	<b>ELIGIBLE INDIVIDUAL:</b>
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**PERIODIC REPORTING INCOME SUMMARY 2012**

<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**MAY 2012**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
		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			_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			

**JUNE 2012**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
					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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			

**JULY 2012**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
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					_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			

**AUGUST 2012**

S	M	T	W	TH	F	S	GROSS WAGES	CAFETERIA PLAN DED.	CHILD SUPPORT	OTHER
			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		_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>							\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>								\$ _____		
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: _____			



<b>ACCOUNT NUMBER</b>	<b>ELIGIBLE INDIVIDUAL:</b>
-----------------------	-----------------------------

**PERIODIC REPORTING INCOME SUMMARY 2012**

<b>TYPE OF INCOME (e.g., wages):</b>	<b>PAYER:</b>
<b>INCOME RECEIVED BY (NAME AND A/N):</b>	<b>TAKEN FROM (e.g., pay stubs):</b>

**SEPTEMBER 2012**

<u>S</u> <u>M</u> <u>T</u> <u>W</u> <u>TH</u> <u>F</u> <u>S</u>	<b>GROSS WAGES</b>	<b>CAFETERIA PLAN DED.</b>	<b>CHILD SUPPORT</b>	<b>OTHER</b>
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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>	\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>		\$ _____		

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: \_\_\_\_\_

**OCTOBER 2012**

<u>S</u> <u>M</u> <u>T</u> <u>W</u> <u>TH</u> <u>F</u> <u>S</u>	<b>GROSS WAGES</b>	<b>CAFETERIA PLAN DED.</b>	<b>CHILD SUPPORT</b>	<b>OTHER</b>
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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>	\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>		\$ _____		

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: \_\_\_\_\_

**NOVEMBER 2012**

<u>S</u> <u>M</u> <u>T</u> <u>W</u> <u>TH</u> <u>F</u> <u>S</u>	<b>GROSS WAGES</b>	<b>CAFETERIA PLAN DED.</b>	<b>CHILD SUPPORT</b>	<b>OTHER</b>
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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>	\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>		\$ _____		

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: \_\_\_\_\_

**DECEMBER 2012**

<u>S</u> <u>M</u> <u>T</u> <u>W</u> <u>TH</u> <u>F</u> <u>S</u>	<b>GROSS WAGES</b>	<b>CAFETERIA PLAN DED.</b>	<b>CHILD SUPPORT</b>	<b>OTHER</b>
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	_____	_____	_____	_____
<b>MONTHLY TOTALS:</b>	\$ _____	_____	_____	_____
<b>YEAR-TO-DATE TOTAL:</b>		\$ _____		

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: \_\_\_\_\_