

| | |
|-----------------------|-----------------------------|
| ACCOUNT NUMBER | ELIGIBLE INDIVIDUAL: |
|-----------------------|-----------------------------|

PERIODIC REPORTING INCOME SUMMARY 2011

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

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 | | | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

| | |
|-----------------------|-----------------------------|
| ACCOUNT NUMBER | ELIGIBLE INDIVIDUAL: |
|-----------------------|-----------------------------|

PERIODIC REPORTING INCOME SUMMARY 2011

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

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 | | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

| | |
|-----------------------|-----------------------------|
| ACCOUNT NUMBER | ELIGIBLE INDIVIDUAL: |
|-----------------------|-----------------------------|

PERIODIC REPORTING INCOME SUMMARY 2011

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

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 | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

| | |
|-----------------------|-----------------------------|
| ACCOUNT NUMBER | ELIGIBLE INDIVIDUAL: |
|-----------------------|-----------------------------|

PERIODIC REPORTING INCOME SUMMARY 2012

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

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 | | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | | _____ | _____ | _____ | _____ |
| MONTHLY TOTALS: | | | | | | | \$ _____ | _____ | _____ | _____ |
| YEAR-TO-DATE TOTAL: | | | | | | | | \$ _____ | | |
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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 | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

| | |
|-----------------------|-----------------------------|
| ACCOUNT NUMBER | ELIGIBLE INDIVIDUAL: |
|-----------------------|-----------------------------|

PERIODIC REPORTING INCOME SUMMARY 2012

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

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 | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | _____ | _____ | _____ | _____ |
| MONTHLY TOTALS: | | | | | | | \$ _____ | _____ | _____ | _____ |
| YEAR-TO-DATE TOTAL: | | | | | | | | \$ _____ | | |
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| 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 | | | | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

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 | | _____ | _____ | _____ | _____ |
| 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: _____ | | | |

| | |
|-----------------------|-----------------------------|
| ACCOUNT NUMBER | ELIGIBLE INDIVIDUAL: |
|-----------------------|-----------------------------|

PERIODIC REPORTING INCOME SUMMARY 2012

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

SEPTEMBER 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 | | | | | | | _____ | _____ | _____ | _____ |
| 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: _____

OCTOBER 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 | | | | _____ | _____ | _____ | _____ |
| 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: _____

NOVEMBER 2012

| S | M | T | W | TH | F | S | GROSS WAGES | CAFETERIA PLAN DED. | CHILD SUPPORT | OTHER |
|----------------------------|----|----|----|----|----|----|----------------|------------------------|------------------|-------|
| | | | | | 1 | 2 | \$ _____ | _____ | _____ | _____ |
| 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: | | | | | | | | \$ _____ | | |

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

| 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 | | | | | | _____ | _____ | _____ | _____ |
| 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: _____